CITY AND COUNTY OF NORWICH

ANNUAL REPORT

UPON THE

HEALTHINESS OF THE CITIZENS

AND ON

THE SANITARY CONDITION

BY

The Medical Officer of Health

AND THE

Report of the School Medical Officer

TO THE

EDUCATION AUTHORITY

FOR THE YEAR

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PUBLIC HEALTH SERVICES

Health Committee.

Lord Mayor :
ALDERMAN P. E. CURL, J.P.

Chairman :
COUNCILLOR J. FLACK, M.B.

Vice-Chairman :
COUNCILLOR R. P. BRAUND.

Members :

Ald.	MISS M. M. CLARKSON, C.B.E., J.P.	*Coun.*	H. J. JARROLD
Coun.	J. BROOKSBANK	,,	H. W. PALMER
,,	MRS. E. K. FUGILL	,,	REV. H. PITTS
,,	E. B. HINDE, M.B. (from 19th April, 1938)	,,	A. E. PUMMELL
,,	L. A. HOWES	,,	A. SOUTH
		,,	H. C. SOUTHGATE
		,,	MRS. A. M. WITARD

The undermentioned are co-opted members for Blind Persons Welfare Business :

MR. R. C. FANTHORPE ... *Superintendent and Secretary of the Norwich Institution for the Blind.*

MR. J. BRIGHTY
MR. H. FULLER } *Representatives of Blind Persons.*

Maternity & Child Welfare Committee.

Chairman :
COUNCILLOR H. W. PALMER.

Vice-Chairman :
COUNCILLOR R. P. BRAUND.

Members :

As Health Committee, with the addition of three co-opted members, viz., Mrs. F. E. M. Deacon, Dr. Violet M. Jewson, and Mrs. A. E. Kent.

Public Health Department,

Churchman House,

68 St. Giles' Street,

Norwich.

8th June, 1939.

My Lord Mayor, Ladies and Gentlemen,

I beg to submit, as your Medical Officer of Health, the Annual Report for the year 1938. The Order of the Report has been somewhat altered from the order suggested by the Ministry of Health.

Dr. J. J. Murphy relinquished his appointment as Assistant Medical Officer of Health, Resident Medical Officer at the Isolation Hospital, etc., on 24th May, and Dr. J. F. Caithness succeeded him on 11th June. Dr. G. W. Riddel returned to duty on 6th July.

The Registrar-General has estimated the population of Norwich at 122,300, a further drop of 700 and a drop of 4300 since 1932. It will be of interest to see whether the 1941 census confirms this constant and rapid decrease. The birth rate continued to fall and the death rate rose slightly. An interesting feature of the birth statistics is that there were more female than male live births. This is distinctly unusual.

1938 was a satisfactory year. The maternal mortality rate and the still-birth rate rose slightly, but the infantile mortality rate dropped remarkably. A rate of 35.04 is well below our previous low record of 40.5 in 1928. It also compares very favourably with the rate of 53 for England and Wales. Moreover, the mortality rate for children between one year and five years of age has also markedly decreased. These figures are all the more remarkable seeing that measles was rather prevalent in the early months of the year.

With regard to tuberculosis, the number of deaths from pulmonary tuberculosis rose slightly from 61 in 1937 to 63 in 1938, but those from other tuberculous deaths dropped from 11 in 1937 to 6 in 1938, so that the total tuberculosis death rate has

decreased. In this respect it is well to remember that 1937 produced the lowest figure for pulmonary tuberculosis deaths ever recorded. The notifications of both pulmonary and surgical tuberculosis rose slightly in 1938.

With regard to infectious diseases, these were fairly active during the year. There was a slight rise in diphtheria and a definite rise in acute primary pneumonia. Measles and whooping cough were somewhat prevalent while chickenpox and mumps produced definite outbreaks. The Sonne type of dysentery was also present. In my Report for 1937 I mentioned the effect which such infectious diseases as measles, whooping cough or influenza have on the infantile mortality rate, and I must express some fear of the effect which the new Nursery Schools are likely to have on the infantile mortality rate by the passage of infectious diseases to the youngest members of the family.

The Isolation Hospital and Maternity Home continue to merit the confidence of the citizens and the Domiciliary Midwifery Service is working smoothly. The Home Help System is also filling a need but is not so easy of management.

The housing activities of the department have been considerable during the year, but not quite as active as in previous years for various reasons. The Council will realise from its other reports that the rehousing of the displaced population is by its nature a slow process.

The numbers of blind on the register show a very slow decrease and all the usual activities on behalf of the sightless have been carried out.

During the year 371 medical examinations of employees or candidates for posts were carried out by the officers of the department.

Air Raid Precautions which started at the latter end of 1935 and continued with a steady crescendo through 1936 and 1937 have in 1938 required considerable time and attention and show no immediate prospect of decrease.

The Sanitary Inspectors' Department, including the refuse collection staff, continue to carry out vital functions in the City and they do so with great efficiency and at a relatively small cost. The Report sets out the volume of work done by the Sanitary Inspectors and the usual table of cost with regard to the refuse collection and the fact that very few complaints are received demonstrate the efficiency of the refuse collection.

The Council again owe thanks to those voluntary workers who have continued to assist us at the Infant Welfare Centres and the Socials for the Blind, and I am glad to pay my personal thanks to the members of the various Committees concerned and of the Public Health Staff as a whole who have supported me in every possible way.

I have the honour to be,

My Lord Mayor, Ladies and Gentlemen,

Your obedient servant,

V. F. SOOTHILL,

Medical Officer of Health
and School Medical Officer.

(1) STAFF OF THE PUBLIC HEALTH AND SCHOOL MEDICAL SERVICES, 1938.

PERMANENT WHOLE-TIME OFFICERS.

V. F. Soothill, M.A., M.D., B.Ch. (Cantab.), D.P.H., M.R.C.S. (Eng.), L.R.C.P. (Lond.).
Medical Officer of Health and School Medical Officer;
Medical Superintendent, Isolation Hospital;
Adm. Tuberculosis Officer, and Adm. Maternity and Child Welfare Officer.

G. L. Leggat, O.B.E., M.B., Ch.B. (Ed.), D.P.H.
Deputy Medical Officer of Health.

G. W. Riddel, *M.C.*, M.B., Ch.B. (Aber.), D.P.H.
Medical Officer in charge of School Medical Service and
Assistant Medical Officer of Health.

Miss M. Bow, M.B., Ch.B. (Ed.), D.P.H., M.M.S.A.
Medical Officer in charge of Maternity and Child Welfare;
Assistant Medical Officer of Health and
Assistant School Medical Officer.

R. B. Boston, M.B., Ch.B., F.R.C.S. (Ed.), D.P.H.
Clinical Tuberculosis Officer, Assistant Medical Officer of Health and
Assistant School Medical Officer.

Miss R. O. Morris, M.D., Ch.B. (Ed.), D.P.H.
Assistant Medical Officer of Health and
Assistant School Medical Officer.

J. J. Murphy, M.B., B.Ch., B.A.O. (N.U.I.), D.P.H.
Assistant Medical Officer of Health;
Assistant School Medical Officer and
Resident Medical Officer, Isolation Hospital (until 24th May, 1938).

J. F. Caithness, M.B., Ch.B. (Manch.), D.P.H.
Assistant Medical Officer of Health;
Assistant School Medical Officer and
Resident Medical Officer, Isolation Hospital (from 11th June, 1938).

PART-TIME OFFICERS.

G. Maxted, M.D. (Lond.), F.R.C.S. (Eng.).
Ophthalmic Surgeon, three sessions each week.

N. S. Carruthers, F.R.C.S. (Ed.) R. A. Highmoor, F.R.C.S. (Ed.).
Consultant Ear, Nose and Throat Specialists, Isolation Hospital, and to the Education and Maternity and Child Welfare Committees.

H. A. Brittain, M.A. (Dub.), M.B., M.Ch., B.A.O., F.R.C.S.
Orthopædic Surgeon.

Consultants to the Maternity and Child Welfare Committee.

M. W. B. Bulman, M.D., M.S., F.R.C.S. (Eng.).
A. Crook, M.R.C.S., L.R.C.P. (Lond.).
E. B. Hinde, M.B., B.Ch., F.R.C.S. (Ed.), L.R.C.P. (Lond.).
C. Noon, O.B.E., F.R.C.S., L.R.C.P. (Lond.).

Maternity Home.

A. Crook, M.R.C.S., L.R.C.P. (Lond.)
Consultant Obstetrician.

C. Noon, O.B.E., F.R.C.S., L.R.C.P. (Lond.).
Consultant Surgeon.

Public Vaccinator.

J. Bannerman, L.R.C.P., L.R.C.S. (Ed.), L.R.F.P.S. (Glas.).

Venereal Diseases Clinics (At Norfolk and Norwich Hospital).

S. H. Long, M.D. (Cantab.).

T. J. Wright, F.R.C.S. (Ed.), M.R.C.S. (Eng.), L.R.C.P. (Lond.).

G. P. C. Claridge, M.B., B.S. (Lond.), (Pathologist).

Veterinary Inspector.

(Under Diseases of Animals Acts and Orders, Milk and Dairies Act, 1915, and Milk and Dairies Order, 1926.)

H. V. Low, M.R.C.V.S. (Part-time until 8th June, 1938).

District Medical Officers under the Poor Law Acts.*

District No.	1.	A. W. Taylor, M.B., B.S. (Lond.), M.R.C.S. (Eng.), L.R.C.P. (Lond.)
,,	,, 2.	A. O'Donovan, M.B., B.Ch., B.A.O. (N.U.I.), L.M.
,,	,, 3.	T. T. Hutchison, M.B., Ch.B. (Glas.).
,,	,, 4.	V. M. Jewson, M.A. (Cantab.), M.B., Ch.B. (Man.)
,,	,, 5.	D. S. Napier, M.B., Ch.B. (Ed.)
,,	,, 6.	R. K. Bryce, M.R.C.S. (Eng.), L.R.C.P. (Lond.)
,,	,, 7.	L. H. B. Mills, M.B., Ch.B. (Ed.)
,,	,, 8.	J. S. Whiteside, L.R.C.P., L.R.C.S. (Ed.), L.R.F.P.S. (Glas.)

Public Analyst.

W. Lincolne Sutton, F.I.C. (Part-time).

SCHOOL DENTAL OFFICERS (Whole-time).

Senior:

C. R. Knowles, L.D.S. (Leeds).

Assistants :

J. E. D. Pollard, L.D.S. (Eng.)

Miss K. L. Gardner, L.D.S., R.F.P.S. (Glas.)

MATRONS.

Isolation Hospital :
Miss F. Morrison.

Maternity Home :
Miss F. G. O. Moorcroft.

HEALTH VISITING STAFF, ETC.

1 Inspector of Midwives.

12 Health Visitors and School Nurses.

2 Nurses engaged in the Dental and Minor Ailments Clinics.

1 Tuberculosis Visitor and School Nurse.

1 Orthopædic Masseuse.

2 Home Teachers and Visitors of the Blind.

2 Infant Life Protection Visitors who also act as Assistant Lady Relieving Officers, etc.

1 Attendant for cleansing children's heads (part-time).

All the Health Visitors hold the Certificate of the C.M.B.; and a Certificate in General Nursing Training.

There are also 3 clerk attendants in the dental clinic, 1 part-time.

SENIOR SANITARY INSPECTOR.

G. D. KIRBY, M.R.S.I., M.Inst.P.C., M.S.I.A.

DEPUTY SENIOR SANITARY INSPECTOR.

L. H. ENGLAND, M.S.I.A.

SANITARY STAFF.

11 Inspectors (1 temporary). All holding the Certificate of the Royal Sanitary Institute for Sanitary Inspectors and 10 the Certificate of the Royal Sanitary Institute for Inspectors of Meat and Other Foods.

1 Unqualified temporary Assistant.

3 Cleansing Inspectors and 1 Disinfection and Drainage Officer.

CLERICAL STAFF.

23 Clerks (1 temporary).

*Officers in the service of the Public Assistance Committee.

ANNUAL REPORT, 1938.

STATISTICS.

Area (in acres)	7,898
Population (Census, 1931)	126,236
,, Estimated middle of 1938	122,300
Number of inhabited houses (end of 1938) according to Rate Books—approximately	35,000
Rateable Value (December, 1938)	£780,666
Sum represented by a penny rate—estimated ...	£3,000

VITAL STATISTICS.

		Total.	M.	F.	
Live Births	Legitimate ...	1515	724	791	Birth Rate **13.07** per 1000 of the estimated resident population
	Illegitimate ...	83	50	33	
	Total ...	1598	774	824	

The Rates for the previous years were:—

1929	1930	1931	1932	1933	1934	1935	1936	1937
15.85	15.72	15.44	14.73	13.98	14.22	13.80	13.23	13.63

The Birth Rate for 1938 for England and Wales was 15.1 and for the 126 Great Towns was 15.0 per 1000 population.

		Total.	M.	F.	
Still-Births	Legitimate ...	56	36	20	Rate per 1000 total (live and still-) births—**36.19**
	Illegitimate ...	4	2	2	
	Total ...	60	38	22	
Deaths		1465	756	709	Death Rate **11.98** per 1000 of the estimated resident population

Area Comparability Factor	.92
Adjusted Death Rate	11.02

The Crude Death Rates for the previous years were:—

1929	1930	1931	1932	1933	1934	1935	1936	1937
13.95	10.95	12.09	12.08	12.78	11.53	11.38	12.00	11.61

The Adjusted Death Rates for the previous years were:—

1934	1935	1936	1937
10.6	10.46	11.04	10.68

The Death Rate for 1938 for England and Wales was 11.6 and for the 126 Great Towns was 11.7 per 1000 population.

Maternal Mortality From Sepsis ... 2
,, Other causes 3

		Puerperal Sepsis.	Other Causes.	Total.
Maternal Mortality Rate	per 1000 live births	1.25	1.88	3.13
	per 1000 Total (live and still-) births	1.21	1.81	3.02
The Maternal Mortality Rate for England and Wales was	per 1000 live births	0.89	2.19	3.08
	per 1000 Total (live and still-) births	0.86	2.11	2.97

The Maternal Mortality Rates for the previous years were :—

	PUERPERAL SEPSIS. Rate per 1000			OTHER CAUSES. Rate per 1000			TOTALS.	
	No. of Maternal Deaths.	Live births.	Total (Live and stillbirths).	No. of Maternal Deaths.	Live births.	Total (Live and stillbirths).	Per 1000 Live births.	Per 1000 Live and stillbirths.
1931 ...	3	1.53	1.45	2	1.02	0.97	2.55	2.42
1932 ...	3	1.60	1.55	1	0.54	0.52	2.14	2.07
1933 ...	2	1.13	1.10	4	2.27	2.19	3.40	3.29
1934 ...	4	2.24	2.17	7	3.91	3.79	6.15	5.96
1935 ...	1	0.58	0.56	3	1.74	1.69	2.32	2.25
1936 ...	3	1.83	1.77	5	3.06	2.95	4.89	4.72
1937 ...	2	1.19	1.15	3	1.79	1.73	2.98	2.88

Infant Mortality Rate :—

All Infants per 1000 live births 35.04
Legitimate Infants per 1000 legitimate live births 34.32
Illegitimate Infants per 1000 illegitimate live births 48.19

The Infant Mortality Rates for the previous years were :—

1929	1930	1931	1932	1933	1934	1935	1936	1937
74.9	44.6	54.64	56.30	62.96	45.86	48.23	51.95	52.47

Infantile Mortality Rate for England and Wales for 1938 was 53.0
,, ,, ,, ,, 126 Great Towns ,, ,, ,, 57.0
,, ,, ,, ,, London ,, ,, ,, 57.0

The illegitimate Infantile Mortality Rate was 48.19 per 1000 illegitimate live births.

The corresponding figures for previous years were :—

1929	1930	1931	1932	1933	1934	1935	1936	1937
70.7	75.47	72.16	114.58	73.17	95.89	65.93	152.17	60.24

The following table shows the numbers of Legitimate and Illegitimate Live Births registered during the last thirteen years :—

	Legitimate.	Illegitimate.	Total.	% of Illegitimate Births.
1926	2054	91	2145	4.24
1927	2019	116	2135	5.43
1928	1925	99	2024	4.89
1929	1890	99	1989	4.98
1930	1867	106	1973	5.37
1931	1861	97	1958	4.95
1932	1769	96	1865	5.15
1933	1681	82	1763	4.65
1934	1715	73	1788	4.08
1935	1630	91	1721	5.29
1936	1544	92	1636	5.62
1937	1594	83	1677	4.95
1938	1515	83	1598	5.19

The Infantile Mortality is worthy of analysis, and Table I is of interest. Comments are made on pages 19-21 and 79.

Deaths from Measles (all ages)	4
,, ,, Whooping Cough (all ages)	4
,, ,, Diarrhœa (under 2 years of age)	5

The numbers of deaths from Diarrhœal Diseases up to 2 years of age during the previous years were :—

1929	1930	1931	1932	1933	1934	1935	1936	1937
10	5	5	4	9	2	5	1	9

Mortality Rate—1 to 5 years.

The Death rates per 1000 of the estimated population for children between the ages of 1 and 5 years were :—

1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
0.4	0.36	0.28	0.39	0.28	0.36	0.23	0.31	0.22	0.12

Tuberculosis. There were 63 deaths from Pulmonary Tuberculosis (Death Rate 0.51 per 1000 population) and 6 from other Tuberculous Diseases (Death Rate 0.049 per 1000 population).

The Death Rates for this Disease for the previous years were :—

1926	...	(Pulmonary)	0.73	(Other Forms)	0.18
1927	...	,,	0.87	,, ,,	0.21
1928	...	,,	0.65	,, ,,	0.10
1929	...	,,	0.80	,, ,,	0.14
1930	...	,,	0.62	,, ,,	0.09
1931	...	,,	0.61	,, ,,	0.08
1932	...	,,	0.79	,, ,,	0.09
1933	...	,,	0.73	,, ,,	0.11
1934	...	,,	0.77	,, ,,	0.16
1935	...	,,	0.62	,, ,,	0.07
1936	...	,,	0.61	,, ,,	0.18
1937	...	,,	0.49	,, ,,	0.089

CANCER.

Malignant growths accounted for 234 deaths, with a Death Rate of 1.91 per 1000 population. The numbers of deaths in 1936 and 1937 were 215 and 219 respectively. The table on pages 127-128 shows the ages at which death took place, and the sites of the disease.

INFANTILE MORTALITY OF EACH WARD IN NORWICH.

Ward.	Births registered, 1938.	Deaths under 1 year, 1938.	Infantile Mortality Rate per 1000 live births. 1938.	1937.	1936.	1935.	1934.
Earlham ...	162	6	37.0	47.0	55.5	20.2	37.0
Heigham ...	67	6	89.5	42.6	41.2	37.4	34.1
Hellesdon ...	107	6	56.1	47.6	105.7	47.6	61.1
Catton ...	167	2	12.0	38.7	54.4	80.3	52.6
Mousehold	129	8	62.0	77.5	59.4	32.6	38.8
Westwick ...	96	2	20.8	36.7	8.7	87.0	50.0
Coslany ...	77	3	39.0	23.8	63.2	42.0	66.6
Fye Bridge	63	4	63.5	101.4	14.9	35.7	75.6
Thorpe ...	152	5	32.9	51.9	69.0	29.6	57.7
Eaton ...	56	1	17.9	30.3	30.8	71.4	60.0
Town Close	61	—	0.0	76.9	40.5	25.6	16.4
Lakenham ...	87	2	23.0	38.5	27.8	41.3	21.3
Nelson ...	73	2	27.4	15.9	32.3	20.0	44.1
St. Stephen	90	4	44.4	54.9	47.2	0.0	60.0
Conesford ...	55	—	0.0	104.5	79.4	160.0	52.1
Ber Street	97	5	51.5	96.5	87.7	61.4	13.0

TABLE I. Infantile Mortality.

Deaths from stated Causes in Weeks and Months under One Year of Age.

CAUSE OF DEATH.		Under 1 Week	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 4 Weeks.	4 Weeks -2 Months.	2-3 Months.	3-4 Months.	4-5 Months.	5-6 Months.	6-7 Months.	7-8 Months.	8-9 Months.	9-10 Months.	10-11 Months.	11-12 Months.	Total Deaths under One Year.
Common Infectious Diseases	Small-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Chicken-pox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Measles	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	1
	Scarlet Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Diphtheria : Croup ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	1	—	—	2	—	3
	Dysentery	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Gastro-Enteritis ...	1	—	1	—	2	—	—	1	1	—	—	—	—	—	—	—	4
Wasting Diseases	Premature Birth ...	13	1	—	—	14	1	—	—	—	—	—	—	—	—	—	—	15
	Congenital Defects ...	11	1	2	1	15	2	—	1	—	—	—	1	—	—	1	—	20
	Injury at Birth ...	2	—	—	—	2	1	—	—	—	—	—	—	—	—	—	—	3
	Want of Breast-Milk ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Atrophy, Debility, Marasmus	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1
	Improper Feeding ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculous Diseases	Tuberculous Meningitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Tuberculous Peritonitis / Tabes Mesenterica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Other Tuberculous Diseases	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1
	Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Syphilis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Rickets	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Meningitis (*not Tuberculous*)	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Convulsions	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Laryngitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Bronchitis	—	—	—	—	—	1	—	—	—	—	—	1	—	—	—	—	2
	Pneumonia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Broncho-Pneumonia ...	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1
	Suffocation, Overlaying	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Other Causes	2	—	—	—	2	1	1	1	—	—	—	—	—	—	—	—	5
		30	2	3	1	36	6	1	3	1	—	1	3	—	—	4	1	56

TABLE II.

Causes of Death at different periods of life in the County Borough of Norwich during the Year 1938.

The following information has been supplied by the Registrar-General.

	Causes of Death.	All Ages	0—	1—	2—	5—	15—	25—	35—	45—	55—	65—	75—
	All Causes	1465	56	8	7	24	35	52	66	130	204	335	548
1	Typhoid and Paratyphoid Fevers ...	—	—	—	—	—	—	—	—	—	—	—	—
2	Measles	4	1	1	1	1	—	—	—	—	—	—	—
3	Scarlet Fever	—	—	—	—	—	—	—	—	—	—	—	—
4	Whooping Cough	4	3	—	1	—	—	—	—	—	—	—	—
5	Diphtheria	9	—	—	2	7	—	—	—	—	—	—	—
6	Influenza	7	—	—	1	—	—	—	—	—	1	1	4
7	Encephalitis Lethargica	2	—	—	—	—	—	—	—	1	1	—	—
8	Cerebro-Spinal Fever	1	—	—	—	1	—	—	—	—	—	—	—
9	Tuberculosis of Respiratory System ...	63	—	1	—	—	12	12	15	12	7	3	1
10	Other Tuberculous Diseases... ...	6	1	—	—	1	1	—	—	—	2	1	—
11	Syphilis	2	—	—	—	—	—	—	—	1	1	—	—
12	General Paralysis of the Insane, Tabes Dorsalis	6	—	—	—	—	—	—	3	1	2	—	—
13	Cancer, Malignant Disease	234	—	—	—	—	1	3	11	30	63	68	58
14	Diabetes	27	—	—	—	—	—	—	1	3	3	13	7
15	Cerebral Hæmorrhage, etc.	109	—	—	—	—	—	—	1	8	19	31	50
16	Heart Disease	314	—	—	—	1	4	4	11	18	33	96	147
17	Aneurysm	11	—	—	—	1	1	—	—	3	2	3	1
18	Other Circulatory Diseases	100	—	—	—	—	—	—	—	3	3	28	66
19	Bronchitis	52	2	1	—	—	1	5	1	2	8	6	26
20	Pneumonia (all forms)	52	1	1	—	2	1	2	3	8	10	7	17
21	Other Respiratory Diseases... ...	15	—	—	—	1	—	1	—	3	2	5	3
22	Peptic Ulcer	16	—	—	—	—	—	—	2	4	6	1	3
23	Diarrhœa, etc.	12	4	1	—	—	—	1	—	1	1	1	3
24	Appendicitis	7	—	—	—	1	1	1	1	1	2	—	—
25	Cirrhosis of Liver	1	—	—	—	—	—	—	—	—	1	—	—
26	Other Diseases of Liver, etc. ...	5	—	—	—	—	—	1	—	—	—	—	4
27	Other Digestive Diseases	32	2	—	1	2	1	3	2	4	4	8	5
28	Acute and Chronic Nephritis ...	34	—	—	—	—	2	2	1	2	6	9	12
29	Puerperal Sepsis	2	—	—	—	—	—	2	—	—	—	—	—
30	Other Puerperal Causes	3	—	—	—	—	—	3	—	—	—	—	—
31	Congenital Debility, Premature Birth, Malformations, etc.	40	39	1	—	—	—	—	—	—	—	—	—
32	Senility	101	—	—	—	—	—	—	—	—	1	13	87
33	Suicide	23	—	—	—	—	—	3	4	6	3	5	2
34	Other Violence	52	2	1	—	2	4	4	2	7	7	4	19
35	Other Defined Diseases	118	1	1	1	4	6	5	8	12	16	32	32
36	Causes Ill-defined, or Unknown ...	1	—	—	—	—	—	—	—	—	—	—	1

GENERAL

LEGISLATION IN FORCE.

Adoptive and Local Acts: Special Local Orders, Bye-Laws, and Regulations in force in the district relating to Public Health.
Local Acts:—

1806—An Act for better paving, lighting, cleansing, watching, and otherwise improving the City of Norwich.
1825—An Act amending and enlarging the last-mentioned Act.
1867—City of Norwich Act.
1879—Norwich Improvement Act.
1889—Norwich Corporation Act.
1933—Norwich Corporation Act.

General Adoptive Acts:—

Public Health Acts Amendment Act, 1890. (Sections 28, 29, 30 and 31.)
Public Health Acts Amendment Act, 1907—Part II; certain sections in Parts IV and VII and Parts VI, VIII and IX.
Public Health Act, 1925—Part II. (Sections 13—33 inclusive.)

Local Orders, Bye-Laws and Regulations:—

Orders as to Notification of Infectious Diseases:—
Glanders, Anthrax and Hydrophobia in Man, 1909.
Undulant Fever.
Orders under Public Health Acts, declaring certain trades to be offensive trades, 1911 and 1922.

Bye-Laws:—

Prevention of Nuisances arising from Snow, Filth, etc., 1859.
Common Lodging Houses, 1894.
Tents, Vans, Sheds, and Similar Structures, 1910.
Slaughter-houses, 1911 and 1927.
Offensive Trades, 1914 and 1922.
Nursing Homes, 1928.
Smoke Abatement, 1929.
Drainage of Existing Buildings, 1935.
Houses-let-in-Lodgings, etc., 1935.
New Streets and Buildings, 1935.
Prevention of Grease, Fat and Oil from discharging into Sewers 1935.
Prevention of Nuisances, 1935.
Tipping of Dust, Spoil and Refuse, 1935.
Transport of Food, 1936.

Regulations:—

Underground Rooms, 1937.

SOCIAL CONDITIONS.

The social conditions of the City do not alter much from year to year, and yet there is no doubt that over a period of years a great change has taken and is taking place. The homes of many of the people have undoubtedly been improved out of all recognition through the City's housing activities and the mentality of certain classes is also improving. The Sanitary Inspectors, Health Visitors and School Teachers must be given credit for a good deal of this. When one considers the size of the problem and the difficulties involved, this change is being worked with remarkable rapidity. There are some whose condition will always be bad owing to their mentality, but on the whole a great deal of progress has been and is being made. The spirit of "divine discontent," though a disturbing and uncomfortable factor and at times ill-directed, is nevertheless an encouraging sign. It used to be said that if people were given baths the baths would be used for storing coal. This, as far as Norwich is concerned, is now a myth. It does not happen. A rumour was raised that this was happening in one or two houses and particular enquiries were made at those houses and the rumour was found to be false. A suggestion that the tooth brush is used as common property throughout the family has been recently used for certain propaganda. The mere fact that such a suggestion can be made at all implies an already vast improvement but enquiries have been made and, while there may be still families without a tooth brush at all and while there are a few families where the tooth brush is perhaps common property, this is nowadays definitely unusual here in Norwich.

Reference to the Infantile Mortality Rate and the appropriate chart shows rather an interesting situation and history of events. As far as Norwich is concerned, history is repeating itself in a remarkable way, and it may be said that this can also be seen in the figures of some other boroughs and of England and Wales generally. The chart shows a high Infantile Mortality Rate with fluctuations from 1900 to 1907. This was followed by a big and rapid drop to about 1910. After 1908 there was only a slight drop with a series of fluctuations until 1915. This was again followed by a large and rapid drop to about 1928, disregarding one year's rise in 1918 presumably due to the influenza outbreak. From 1926 there has followed a series of fluctuations very similar indeed to the fluctuations between 1908 and 1915 and the figure for 1938 suggests that we may now be at the beginning of another big drop which was predicted from a previous study of the Chart. Obviously this is a process which cannot be repeated indefinitely, and the Chart does suggest a

general diminution in the rate of decrease, which diminution is only to be expected. However, the interesting question is what is the cause of this present drop. It may be said at once that this cause is not obvious. One would like to be able to put it down to improved ante-natal work, but the fact that the still-birth and the neo-natal mortality rates have not dropped in a similar way does not support that contention. At present one can only associate it with the decreasing birth rate and the general improvement in the conditions of the population in the way of housing, nutrition, cleanliness, etc. The causes of the two previous big drops are obvious. The drop from 1914 to 1928 was due to the abolition of gastro-enteritis, associated with the making safe of the milk supply to young children by using boiled, dried or condensed milk. One still has vivid recollections of the numbers of infants and toddlers dying of this disease just before the War in the east end of London. The drop in the rate from 1904 to 1910 was associated with the reduction of abdominal and meningeal tuberculosis. This can be confirmed by looking at the Chart of Tuberculosis Deaths. It can be seen that this reduction became marked from 1904 and has continued with the exception of the War years in a gradually flattening curve up to the present. The start of this marked reduction followed and is presumably due to the awakening of the public conscience to the cause of tuberculosis and its association with infection and dirt, this awakening culminating in such public efforts as the passing in 1902 of Byelaws for the prohibition of spitting in public vehicles. This determination to clean up and prevent the spread of infection culminating in about 1902 and producing a drop in the abdominal and meningeal tuberculosis deaths could be expected to produce also a drop in the pulmonary tuberculosis deaths, but it would also be expected that this latter result would only occur after the lapse of 15 to 25 years, which is frequently the time of death of young pulmonary cases presumably infected in early childhood, and a further look at the Pulmonary Tuberculosis Death Chart shows that this is precisely what happened. While we are thus still left guessing as to the cause of the present drop in the infantile mortality rate, these considerations have given some indication for action. The drop in the surgical tuberculosis deaths beginning in 1904 (and incidentally of the pulmonary tuberculosis deaths beginning about 1921) was not due to the cleaning up of the milk supply or otherwise the gastro-enteritis deaths would have been saved at the same time and by the same means, i.e., boiling, drying or pasteurising the milk. This raises the question indeed as to how far the cow is the responsible factor in causing surgical tuberculosis, whatever may be the type of tubercle bacillus found in the milk. Is it not

possible that the human beings associated with the cows and milk supply are the responsible fountain and origin of the infection back to us, possibly with the cow as an intermediate host? This again raises a still further doubt as to the necessity for the pasteurisation of milk as far as Norwich is concerned and suggests rather the examination of the milkman. At any rate, we are again given confirmation of the beneficial effects and desirability of cleaning up.

Special Noteworthy Sickness. There was no special noteworthy sickness during the year.

LABORATORY FACILITIES.

The examination of swabs for Diphtheria and Widal reactions for the Enteric Group are carried out at the Isolation Hospital (see page 108); the examination of Sputum is also carried out at the Hospital, and at a small laboratory which has been established at the Public Health Offices; 884 specimens were examined at the latter by the Clinical Tuberculosis Officer. More complex pathological examinations are made by private pathologists in the City. For chemical and bacteriological examinations of food, see pages 67-71.

AMBULANCE FACILITIES.

(*a*) **For Infectious Diseases.** A motor ambulance and a motor van with a body which, in emergency, can be used as an ambulance are kept at the Isolation Hospital, available for use within the City. When the Committee purchased the motor ambulance they decided to retain one horse-drawn ambulance, which is kept at the Smallpox Hospital. The motor ambulance is occasionally used for bringing in Infectious Disease cases from a neighbouring district, for which a charge is made.

(*b*) and (*c*) **Non-Infectious, etc., Cases.** The Public Assistance Committee has an ambulance for the removal of cases to the Public Assistance Institution. The Police have 3 motor ambulances available for accident and other cases, and the British Red Cross Society also maintain 2 motor ambulances; the latter are chiefly available for residents of a large area outside the City.

NURSING IN THE HOME.

(*a*) **General.** There is the Norwich District Nursing Association, better known as the Cavell Home, from which nursing is provided on the application of Doctors, the Local Authority, District Visitors, and others; there is also the Norfolk and Norwich Hospital Staff of Trained Nurses and the Norfolk and Norwich Staff of Nurses from which nurses can be obtained;

a Nurses' Co-operation Society and the Nursing Sisters of the Poor (Little Sisters of the Assumption). There are, in addition, a few nursing homes in the City whence nurses are at times sent out.

(*b*) **For Infectious Diseases.** The above agencies send out nurses if required. The Corporation have an arrangement with the Norwich District Nursing Association for the nursing of cases of measles and whooping cough (under five years of age), ophthalmia neonatorum, influenza, puerperal fever and puerperal pyrexia, tuberculosis, and acute primary and acute influenzal pneumonia. A grant of £300 per annum is made to this Association by the Local Authority for these services, and the cost is divided between the Committees concerned according to the number of visits paid.

School Clinics. See pages 151-170.

Venereal Diseases Clinics are held on Monday afternoons, at which certain mothers and children can attend, Tuesday mornings and Friday evenings in a special portion of the Norfolk and Norwich Hospital Out-patient Department, where irrigation is carried out daily, as is special treatment by appointment. 1775 specimens were sent to the laboratory at the Norfolk and Norwich Hospital, 1056 from the clinics, 495 from hospitals and other institutions, and 224 from private practitioners. The following table gives particulars of the attendances, etc., of Norwich persons at the Clinics during the year :—

	Syphilis.		Gonorrhœa.		Conditions other than V.D.		Totals.		
	M.	F.	M.	F.	M.	F.	M.	F.	Totals.
Under treatment or obs., 1st Jan. ...	44	76	26	25	3	2	73	103	176
Removed from Register previously but returned ...	5	4	13	4	—	—	18	8	26
Dealt with for the first time	30	51	71	23	45	44	146	118	264
Dealt with for the first time, but had treatment elsewhere	3	2	3	1	—	—	6	3	9
Totals ...	82	133	113	53	48	46	243	232	475
Total attendances ...	858	1558	3115	516	68	71	4041	2145	6186

The table on page 24, which has been provided by the Medical Officer of the Clinics, and to which I have added the deaths of children under 1 year of age from Congenital Syphilis, and the number of notifications of Ophthalmia Neonatorum received for the same period, shows the work which has been done.

The Medical Superintendent of the Mental Hospital informs me that General Paralytics have been admitted to that Institution during the past eight years, as follows :—

	Males.	Females.	Totals.		Males.	Females.	Totals.
1931	3	1	4	1936	3	—	3
1932	1	—	1	1937	4	1	5
1933	3	—	3	1938	6	2	8
1934	4	—	4		—	—	—
1935	1	1	2	Totals	25	5	30
					—	—	—

The Tuberculosis Dispensary is at Churchman House, and is referred to on page 113. **Clinics** held under the **Maternity** and **Child Welfare Service** receive comment on pages 76-82.

VENEREAL DISEASES.

Norwich Persons treated at the Norfolk and Norwich Hospital.

Year	New Cases.				Total Attendances.	Syphilis.			Gonorrhœa.		Deaths under 1 year of age from Congenital Syphilis.	Notifications of Ophthalmia Neonatorum received.
	Syphilis.	Gonorrhœa.	Not V.D.	Total.		Total Injections of Arsenobenzene compounds.	Cured.	Ceased attending.	Cured.	Ceased attending.		
Av. 1918 to 1922 (inclus.)	71	99	26	196	2288	550	3	15	17	19	5	21
Av. 1923 to 1927 (inclus.)	39	83	35	157	5272	580	37	45	66	47	2	19
1928	44	113	23	180	3424	723	34	40	43	51	—	22
1929	63	104	22	189	6326	761	27	32	51	31	2	19
1930	71	117	14	202	7519	963	26	29	56	32	1	19
1931	55	98	12	165	6895	893	19	23	46	21	1	18
1932	58	103	5	166	5886	857	19	22	44	31	2	17
1933	69	116	5	190	6537	1000	21	14	74	35	2	11
1934	116	103	2	221	6143	1137	32	25	107	44	—	13
1935	64	104	3	171	5893	860	34	190	187	228	1	11
1936	83	69	1	153	5778	1037	42	77	64	26	—	12
1937	165	131	19	315	6736	1434	71	81	90	40	—	11
1938	86	98	89	273	6186	1567	59	40	72	46	—	9

N.B.—Included under heading "ceased attending" are cases transferred to other doctors or clinics.

HOSPITALS USED BY INHABITANTS OF THE AREA.

(*a*) **The Norfolk and Norwich Hospital.** This Institution is supported by voluntary contributions, payments by the Local Authority for the treatment of certain conditions and by payments by patients. It has a total of 440 beds, including 22 for eye cases. 7573 patients were treated during the year, a decrease of 37 compared with 1937; the daily average number of beds occupied was 364, compared with 371 in 1937. The average length of stay of each patient increased from 18.6 days to 19.14 days. 25,541 new patients attended the Out-Patient Department, 2414 more than in the previous year.

The Education Authority has an arrangement with this Hospital for the admission of school children for the operative treatment of tonsils and adenoids, and the Council made certain payments for the treatment of Tuberculosis and Orthopædic patients. Norwich persons suffering from Venereal Diseases were also treated at this hospital, jointly with those from Norfolk, throughout the year. The Corporation also made a subscription to the Hospital.

(*b*) **The Jenny Lind Hospital,** which works in close co-operation with the Norfolk and Norwich Hospital, has 80 beds, and admits boys up to ten years and girls up to twelve years of age, not suffering from an infectious or contagious disease. A limited number of children under the age of two years are admitted at the discretion of the Committee of Management. It is supported by voluntary subscriptions, and payments by patients and the Local Authority. 1788 patients were admitted during the year, the daily average number of beds occupied being 60. 2871 new cases attended the Out-Patient Department. The Education Authority has an arrangement with this hospital for the admission of children for the removal of enlarged tonsils and adenoids. Certain payments were made by the Local Authority for the treatment of orthopædic and surgical tuberculosis cases. The Council also subscribes to the funds of the hospital.

(*c*) **The Public Assistance Institution.** This Institution was transferred to the control of the Council on 1st April, 1930, and remains under the control of the Public Assistance Committee. It is provided with one operating theatre, and a diathermy and ultra-violet light apparatus. The Master states that the following accommodation was provided on 31st December, 1938;

the daily average number of inmates in each department is also given:—

	Number of Beds.	Children's Cots.	Total.	Daily average number of Patients.
Children's Sick ...	70	—		
Male Sick Shelters	13	—	83	90
*Female Sick ...	110	52	162	98
Maternity—				
Labour Wards ...	2	—		
Wards ...	5	5	12	8
Nursery ...	—	30	30	15
Female Infirm ...	200	—	200	152
Male Infirm ...	264	—	264	182
Female Mental ...	50	—	50	31
Male Mental ...	22	—	22	19

*The wing containing the Female Sick Wards was built to accommodate 110 patients, including maternity cases. The accommodation has been increased to 174 beds, by placing beds and children's cots in the wards and on the balconies—causing inevitable overcrowding. This overcrowding should be remedied when the Male Block now in course of erection, is completed towards the end of 1939.

(*d*) **The Isolation Hospital,** under the control of the Health Committee of the City Council, has 94 beds, allowing 144 square feet per bed, but actually more are accommodated. 24 beds are allocated for cases of advanced pulmonary tuberculosis. The work done by this Institution is referred to on pages 102-108.

(*e*) **The Mental Hospital** is situated at Hellesdon, outside the City Boundary and in the St. Faith's Rural District, and is under the control of the Mental Treatment Committee of the City Council. The Medical Superintendent kindly gives me the following particulars. The Statutory accommodation, including that provided in the new admission hospital, is for 339 males and 415 females. 70 beds are occupied by patients from King's Lynn and 147 from Great Yarmouth. The hospital is provided with a laboratory. Dental treatment is carried out at the hospital by a visiting Dental Surgeon.

(*f*) **Accommodation for Mental Defectives.** See pages 27-28.

(*g*) **The City of Norwich Maternity Home** has 15 beds; the particulars of the work done during the year are given on pages 75-76.

(*h*) **The Smallpox Hospital** is on the Salhouse Road. There are 16 beds, allowing 144 square feet per bed, and an observation block of 4 beds. The hospital is wholly supported by the Council.

(*i*) **Tuberculosis Sanatoria.** The extent to which tuberculosis sanatoria were used during the year by inhabitants of the City is referred to in that part of the Report which deals with Tuberculosis. See pages 115-117.

LOCAL GOVERNMENT ACT, 1929.

Institutional Medical Services.

The Town Clerk kindly informs me that during the year the newly constructed Children's Block at the Poor Law Institution was brought into use, the children and some female patients being transferred thereto. The male patients were transferred to wards in the Female Block and the construction of the new Male Block and the demolition of the old Male Block is still in hand. During the year the question of the separation of the administration of the Sick Wards from the general administration of the Institution was considered, but the Public Assistance Committee's recommendations have not yet been before the Council.

Poor Law Medical Out-Relief.

During the year the District Medical Officers paid visits to, or received visits from, persons needing relief as under. The boundaries of Districts Nos. 1 and 2 were adjusted slightly from 1st April by arrangement between the respective District Medical Officers in an effort to obtain a more satisfactory distribution of the work. Information with regard to the allocation of the districts amongst the various Medical Officers is given on page 11.

	District No. :—								
	1.	2.	3.	4.	5.	6.	7.	8.	Totals.
Attendances at Surgery or Medical Officer's residence	1305	1039	1548	489	783	782	553	1118	7617
Attendances at patients' houses...	430	922	325	142	495	787	400	1252	4753
Occasions on which medicine was supplied without seeing the patient ...	Nil	276	18	114	105	600	168	108	1389
Totals ...	1735	2237	1891	745	1383	2169	1121	2478	13759

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

The Council provides accommodation at Eaton Grange Certified Institution, situated at Unthank Road, for high-grade female adult mental defectives. The number on the books on the 31st December was 47.

The Council has also made arrangements with the Norfolk County Council for the reservation of 107 beds at Little Plumstead Colony, but on 31st December, 118 Norwich cases had been accepted. 18 beds are also reserved at the Royal Eastern Counties' Institution, Colchester.

An occupation centre has been established at Eaton Grange, and is held in a building specially erected for the purpose. The centre is in charge of the Committee's enquiry officer and visitor, and is open on the morning of each week-day (Saturday excepted). There was an average attendance of 12.

Sanitary Circumstances of the Area.

WATER.

The water supply obtained from the river Wensum, and controlled by the Local Authority, was constant and was adequate in amount throughout the year. The water was subject to sedimentation, aeration and continuous chlorination, after slow sand or mechanical filtration. Daily bacteriological examinations of the City's supplied water are made, and if any doubt arises in respect of any sample the Analyst's report is supplemented by that of a bacteriologist. From the 7th February to the 31st December, of 282 bacteriological examinations of the water by the City Analyst, 12, or 4.2 per cent. showed the presence of members of the B. Coli-Aerogenes Group in 100 ml. Monthly chemical examinations of the City's supplied water and quarterly examinations of river water and water from the sedimentation reservoir before filtration are made, with additional examinations if necessary. A summary of the results of the routine examinations is shown on pages 30-31.

Further, in an effort to do everything possible to ensure the safety of the supply, the Water Committee instructed that employees who are in a position to pollute the water should be medically examined with reference to their potentiality for pollution of the water supply and that if any of these employees are absent through sickness a copy of the medical certificate be sent to the Medical Officer of Health to enable him to determine whether re-examination is necessary.

A few dwellings in the City still draw water from wells. 15 samples of water were examined from 9 wells. The water from 2 wells was certified as being dangerous to health and totally unfit for drinking purposes; in these cases the City's water supply was laid on. The other samples proved to be satisfactory. 99·9 per cent. of the population are supplied by the Council.

The Water Engineer reports that works of extension of water mains have been carried out during the past year as under :—

	City.		City & County.	
	Miles.	Yds.	Miles.	Yds.
Extension of water mains ...	2	1558	24	521
Total length connected with system	165	565	244	1068

SUMMARY OF MONTHLY ANALYSES OF WATER TAKEN FROM TAP IN LABORATORY DURING 1938.

Month.	Total Solids in Solution.	Ammonia.		Chlorine.	Nitrogen as Nitrates.	Nitrites.	Oxygen absorbed in 4 hrs. at 80° F.	Lime.	Magnesia.	Sulphuric Anhydride.	Silica, Iron and Alumina.	Hardness.		Bacteria per c.c.	B. Coli Absent in.	Physical Characters.
		Saline.	Albuminoid.									Total.	Permanent.			
January (3rd)..	44.0	trace	.009	3.15	.28	Nil.	.164	16.7	0.65	3.26	1.0	28.6	6.45	7	100 c.c.	Clear. Colour 9°
February (1st)	40.5	.001	.010	3.15	.28	Nil.	.142	—	—	—	—	28.3	7.3	26	do.	Bright & Clear. Colour 7.5°
March (1st) ...	39.0	trace	.007	3.1	.32	Nil.	.096	—	—	—	—	26.9	6.3	2	do.	Clear. Colour 4.5°
April (1st) ...	35.5	.001	.007	3.2	.24	Nil.	.064	13.4	.68	3 1	.6	25.15	6.45	Nil.	do.	Clear. Colour 4°
May (2nd) ...	32.0	Nil.	.006	3.15	.20	Nil.	.063	—	—	—	—	22.9	6.4	Nil.	do.	Clear. Colour 3.75°
June (1st) ...	32.0	.001	.007	3.3	.20	Nil..	.075	—	—	—	—	21.4	5 4	1	do.	Clear. Colour 3°

Month.	Total Solids in Solution.	Ammonia.		Chlorine.	Nitrogen as Nitrates.	Nitrites.	Oxygen absorbed in 4 hrs. at 80° F.	Lime.	Magnesia.	Sulphuric Anhydride.	Silica, Iron and Alumina.	Hardness.		Bacteria per c.c.	B. Coli Absent in.	Physical Characters.
		Saline.	Albuminoid.									Total.	Permanent.			
July (1st) ...	28.5	trace	.007	3.3	.12	Nil.	.095	10.6	.56	2.91	.60	19 7	5.6	2	100 c.c.	Clear. Colour 7.5°
August (3rd)...	29.0	Nil.	.006	3.3	.08	Nil.	.094	—	—	—	—	19.4	5 6	Nil.	do.	Clear. Colour 4.5°
September(1st)	30.0	.001	.007	3.45	03	Nil.	.076	—	—	—	—	20.0	5.6	1	do.	Clear. Colour 3°
October (1st)..	32.5	trace	.006	3.45	.12	Nil.	.089	12.5	.68	3.43	.80	22 3	6.45	Nil.	do.	Clear.
November (1st)	37.5	trace	.006	3.4	16	Nil.	.0985	—	—	—	—	24.9	6.9	Nil.	do.	Clear. Colour 6°
December (1st)	41.0	trace	.001	3.6	.20	Nil.	.156	—	—	—	—	27.4	7 3	1	do.	Clear. Colour 10.5°

The chemical results are stated in parts per 100,000, *which may be altered to grains per gallon by multiplying the figures by* 0.7.

DRAINAGE AND SEWERAGE.

Sewerage Works.

The City Engineer reports that during the year important progress was made in improving the efficiency and sufficiency of the sewerage system of the City, comprising the following :—

The systematic inspection, flushing and cleansing of all sewers as necessary.

The reconstruction of sewers found upon examination to be defective in Bexley Square, The Lokes, Tombland, Unthank Road, School Lane, Passage Adelaide Street, St. Benedicts Street, Bethel Street, St. Peter Street, Gaol Hill, St. Giles Street, Denmark Road and Milverton Road.

New sewers have been laid in the following streets :—Half Mile Road, New Road Cowgate to Bull Close, Access Road to Fire Station and the Provision Market.

Sewers have been laid on the new Corporation Housing Estates known as Larkman Lane Estate (West), Catton Grove Estate (South), Earlham Estate (North) and also in the following Clearance Areas :—Barrack Street, Bull Close, Osbornes Yard, Black Swan Yard, Fullers Hall and Union Street.

Sewers damaged by subsidences, etc., have been reinstated as follows :—Earlham Road, Angel Road, Christchurch Road, Park Lane, Havelock Road, Caernarvon Road, Neville Street, Helena Road and Albemarle Road.

Works to mitigate flooding have been carried out in the Jessopp Road and Portersfield Road Area, Knowsley Road Back Passage, Aylsham Road and Brightwell Road.

The redundant sewers from several Clearance Areas have been opened up and properly sealed off.

Several manholes have been constructed and catchpits converted into manholes.

Sewage Pumping, Main Drainage and Sewage Purification Works.

Schemes have been approved by the Council for :—

(*a*) The re-modelling of Trowse Pumping Station, including new pumping plant and mechanical screening plant.

(*b*) An additional main outfall sewer to Trowse Pumping Station and an additional rising main from Trowse to Whitlingham.

(*c*) New sewage purification works at Whitlingham, comprising automatically sludged continuous flow settling tanks, bacteria beds and humus tanks, etc.

The Ministry of Health held a public inquiry on 22nd and 23rd December with regard to the loan sanction for the above works.

Sludge Disposal.

An experimental sludge digestion plant had up to the end of the year been in operation for some six months.

RIVERS AND STREAMS.

Below the intake at Heigham, the Wensum meanders through the City to join the Yare at Trowse. It is subjected to surface pollution and to the influx of waste water, and a certain amount of sewage gets in. On its banks are situated breweries, the gas works, starch mills, etc., but the pollution is not palpably of a gross character.

Just over the southern boundary of the City, near Harford Bridge, a large milk depôt has been erected, which is close to the River Yare.

Samples of water taken from the River Yare in connection with the use of Lakenham Bath for swimming purposes, showed that the river at this point is highly polluted at times, the cause, it is thought, being the discharge from a surface water sewer. The matter has been brought to the notice of the appropriate Committee.

Owing to the fact that people made it a practice to bathe in the river at Whitlingham and Postwick, the vicinity at which the effluent from the City's sewerage farm discharges into the river, seven samples of river water were taken for examination at various points, ranging from approximately $1\frac{1}{2}$ miles above the outfall to Coldham Hall, approximately 6 miles below the outfall. The results of five samples showed that the water was unfit for bathing. As the samples were taken in the late summer no action was taken to warn bathers, but further samples will be taken in the spring of 1939.

CLOSET ACCOMMODATION.

During the year 7 privy pans and 1 privy bin were abolished and water closets were provided with the necessary drainage for connection to the sewer; also 5 privy bins were abolished, and in their places were provided 7 privy pans.

The number of conversions for the 5 previous years are as follows :—

Year.	Privy Bins.	Privy Pans.
1933	—	1
1934	—	6
1935	1	2
1936	—	4
1937	—	7

At the end of the year 117 privy pans (including 5 Elsan Closets) and 4 privy bins were known to exist in the City, the remainder of the premises being supplied with water closets. Of this number 19 privy pans and 1 privy bin are provided in connection with business premises. Sewer is available in the case of 4 privy pans and 1 privy bin, and these are under notice for conversion to water closets except in the case of 1 privy pan where the premises are shortly to be demolished. The remaining privy bins are under notice for conversion to privy pans.

PUBLIC CLEANSING.

The Senior Sanitary Inspector reports as follows :—

Collection and Disposal of Refuse.

During the year, 130,116 cubic yards (approximately 32,769 tons) of house and trade refuse were collected and disposed of at the Harford Refuse Tip.

In addition to this, 1400 loads of trade and other refuse were disposed of at the Harford Tip. This refuse is brought to the tip by various private firms in this City and, in this connection, the Health Committee make a minimum charge of 1/- per load for vehicles of 1 ton and under, and a further charge of 1/- per ton is made according to the tonnage of the vehicle concerned.

Privy pan and bin refuse is removed by the night waggon, and during the year 55 loads of this refuse were disposed of on farms.

The following shows the amount of house and trade refuse collected and taken to the tip by the various kinds of vehicles :—

Vehicles.	Cubic Yards.
Morris	21,016
Ford	5,460
S.D. Freighters (rear loading) ...	19,550
Karriers (rear loading)	24,890
Dennis (rear loading)	59,200
	130,116

Included in the before-mentioned figures are 1808 cubic yards of paper, which was collected in bags.

A weekly collection was given to all private dwelling-houses in the City, but hotels, restaurants, etc., have had their refuse collected four times per week.

It will be seen from the following figures, as was anticipated in my report last year, that the cost of refuse collection and disposal has slightly increased owing to increased cost of wages, petrol and materials.

Costing.	Year ended 31/3/1937. Average of 83 County Boroughs.	Year ended 31/3/1937. Norwich.	Year ended 31/3/1938. Norwich. (Approx.)
Collection :—			
Weight per 1000 population per day	16.8 cwts.	14.3 cwts.	14.3 cwts.
Cost per 1000 population per annum	£144	£126	£135
Cost per 1000 houses per annum	£514	£405	£424
Cost per collection per house per week	2.37d.	1.87d.	1.96d.
Cost per ton...	9/4d.	9/8d.	10/4d.
Disposal :—			
Cost per 1000 population per annum	£62	£40	£41
Cost per 1000 houses per annum	£223	£127	£130
Cost per ton...	4/0d.	3/1d.	3/2d.

Fleet of Mechanical Vehicles in use 31st December, 1938 :—

Class of Vehicle.	No. of Vehicles.	Working Capacity of Body.	Year of Purchase.
Collection :—			
Morris (30 cwt.) ...	1	6 cu. yds.	1931
Morris (Leaders) ...	3	8-9 cu. yds.	1931-1932
Ford	1	6 cu. yds.	1932
S.D. Freighters (rear loading)	2	10 cu. yds.	1935
Karrier (rear loading)	3	10 cu. yds.	1936
Dennis (rear loading) ...	7	10 cu. yds.	1937-1938
Disposal :—			
Ford	3	3 cu. yds.	1935

Cleansing of Earth Closets, Privies, etc.

Privy pans are emptied weekly, and privies when necessary.

Cesspools.

There are 147 cesspools in the City, and these are outside the sewerage system.

There is no appreciable alteration in the situation with regard to the cesspools in the City zone of protection along the river banks. Whilst a number of these cesspools appear to be impervious, the sewage in a number of cases is still being emptied on to the land adjoining, which is not far removed from the river. The City draws its water from the river, and the intakes are below these latter cesspools.

Norwich Corporation Act, 1933.

Section 80 of the above-mentioned Act gives the Corporation power to require the owner or occupier of any dwelling-house, warehouse, shop or other premises, to provide a sufficient number of covered galvanised iron dustbins in lieu of ashpits or ashtubs or other receptacles for refuse, and such dustbins shall be of such size and construction as may be approved by the Corporation.

The Health Committee has standardised the size of the portable galvanised iron dustbins under this Act as follows:— diameter, 16 inches; depth, 20 inches.

During the year 721 new dustbins were provided, and a number of insanitary ashpits have been abolished. It was necessary to serve formal notices requiring the owners of 70 houses to provide dustbins. In consequence of formal notices, 68 dustbins were provided (including 25 for which notices were served in 1937).

Harford Refuse Tip.

Proceedings were instituted under Section 76 of the Public Health Act, 1936, against a person for sorting or disturbing material on the Harford Refuse Tip, and a fine of 2/6 was imposed.

SANITARY INSPECTION OF THE AREA.

The following is a summary of the principal work of the Sanitary Department during the year, and action taken under the various Public Health and Housing Acts, or Byelaws:—

5780 Nuisances detected.
352 Notices served by order of the Health Committee
1554 Preliminary Notices served.
11371 Premises re-inspected.
5034 Nuisances have been abated.
1485 Special complaints have been received and the premises have been inspected.

The following are the principal matters that have been dealt with :—

18	Insufficient closets.
187	Unpaved or defectively paved yards and passages.
73	Choked drains.
188	Defective drains.
721	Insufficient dustbins.
52	Defective water closets.
5	Dirty houses.
3	Animals kept so as to be a nuisance.
546	Houses with defective roofs, floors, walls, etc.
21	Foul accumulations.
124	Defective eaves gutters and rain-water pipes.
20	Sinkwaste pipes defective or not disconnected.
43	Insufficient sinks.
24	Insufficient water supply.

Proceedings were taken against an occupier of a house under Section 50 of the Public Health Act, 1936, for not taking the necessary steps to prevent the overflow of the cesspool, and a fine of 10/- was imposed.

Proceedings were also taken against an occupier of a house under Section 27 of the Public Health Act, 1936, for permitting matter to pass into the drain so as to interfere with the free flow of its contents, and a fine of £1 was imposed.

Houses-let-in-lodgings.

85 visits were made during the year to houses-let-in-lodgings.

Common Lodging-houses.

The 3 common lodging-houses were visited regularly and found to be conducted in a satisfactory manner. In all, 103 visits were made.

Offensive Trades.

The number of offensive trade premises on the register at the end of the year was as follows :—

Fish Friers	83
Dealers in Rags, Skins and Bones ...	11
Fellmongers	2
Fat Melter	1
Tripe Boiler	1
Waterproofing	1
	99

During the year 603 inspections of these premises were made.

Tents, Vans and Sheds.

68 inspections of tents, vans and sheds have been made to ensure that proper sanitary conveniences and sufficient water supply were provided as specified in the Byelaws.

Proceedings were instituted under Section 55 of the Norwich Corporation Act, 1933, against a person for having permitted land to be used for occupation by a van without previous approval of the Corporation, and a fine of 10/- was imposed.

Underground Rooms.

The Council prescribed Regulations under Section 12 of the Housing Act, 1936, for the control of underground rooms.

There are a large number of houses in this City with underground rooms which do not comply with the Regulations, and if the owners fail to comply with the prescribed Regulations, action is being taken to make a Closing Order on that part of each building.

Sanitary Conditions of Theatres, Music Halls, Etc.

During the year 169 inspections were made and, on the whole, the conditions were found to be satsifactory.

Meetings of Owners and Tradesmen.

989 meetings have been held.

House Drains.

During the year 648 drains were tested or examined, and 191 found to be defective; 188 were reconstructed. In addition, 467 drains were tested or examined in Slum Clearance Areas, etc., and 290 found to be defective.

Rats and Mice Destruction Act, 1919.

During the year the following work has been carried out :—

Complaints received			274
Number of new contracts signed (the occupier agreeing to pay for the services of the ratcatcher at the rate of 2/6d. per hour)			50
Number of baits laid—			
Free service	26,626		
Contract service	6,769		
		———	33,395
Number of rats known to be killed—			
Free service	3,306		
Contract service	544		
		———	3,850

The gas machine (with Cyanogas poison), and the "Lepit" apparatus with gas cartridges have been used on 65 occasions.

Piggeries.

36 visits have been paid to piggeries, and repairs carried out at the request of the Inspectors.

Disposal of the Dead.

There are 2 cemeteries in the City, and a Crematorium outside the City boundary. The latter is not under the control of the Council.

RAG FLOCK ACTS, 1911 AND 1928.

Rag flock is manufactured at one wholesale factory in the City and 18 other premises use rag flock in the process of their business.

20 formal samples were taken from these premises during the year, and 17 were certified as conforming with the standard.

In three cases the samples were found to contain more than 30 parts of chlorine in 100,000 parts of the flock. Proceedings were taken in these cases, one was dismissed, and in both the other cases fines of 10/- with £1 1s. 0d. costs were inflicted.

Periodical inspections have been carried out at these premises during the year, and no other infringement of the regulations was found.

FACTORIES.

Total number of Factories using mechanical power	464
Total number of Factories not using mechanical power	259
Number of visits to Outworkers' premises	421

Inspections for purposes of provisions as to health :—

Premises.	Number of		
	Inspections.	Written Notices.	Occupiers Prosecuted.
Factories with mechanical power	771	65	1
Factories without mechanical power	555	39	—
Other premises under the Act (including works of building and engineering construction, but not including Outworkers' premises)	19	—	—
Total ...	1345	104	1

Defects found :—

Particulars.	Number of Defects.			Number of Defects in respect of which Prosecutions were instituted
	Found.	Remedied	Referred to H.M. Inspector	
Want of cleanliness ...	2	—	—	—
Overcrowding	—	—	—	—
Unreasonable temperature	1	—	—	—
Inadequate ventilation ...	1	—	1	—
Ineffective drainage of floors	1	—	—	—
Sanitary Conveniences :—				
Insufficient	16	4	—	1
Unsuitable or defective	80	16	—	—
Not separate for sexes	1	1	—	—
Abstract of Act not exhibited	101	—	101	—
Other offences	17	6	—	—
Total ...	220	27	102	1

Note :—Most of these defects were found in the latter part of 1938, and were in hand at the end of the year.

Proceedings.

In 1 case proceedings were taken against the occupier of a factory for failing to provide sufficient and suitable sanitary conveniences for the persons employed in the factory, and a fine of £3 was imposed.

Outwork in Unwholesome Premises.

In no instances were the premises of outworkers engaged in the making of wearing apparel found to be unwholesome.

Supply of Drinking Water.

11 occupiers of factories made application for the Council's approval of the supply of drinking water at their factory premises, which is obtained from a source other than the Corporation supply, and approval was granted subject to the firms making arrangements with the Public Analyst whereby he will take a sample of the water each quarter at the point of supply, the result being submitted to the Medical Officer of Health.

Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921.

The necessary inspections for carrying out the Order so far as it refers to bakehouses, making of wearing apparel, where there is Scarlet Fever or Smallpox, and homework where there is infectious disease, have been made.

RESTAURANT KITCHENS.

230 visits have been made to restaurant kitchens, and these were found to be kept in clean and proper condition.

SHOPS AND OFFICES.

The following is a synopsis of the inspections made during the year :—

Premises.	Inspected.	Re-inspections.	Notices or letters sent.
Shops	1078	1759	439
Offices	46	12	10
Totals ...	1124	1771	449

1 exemption has been granted under the exemption facilities of the Act in cases of insufficient sanitary conveniences.

The following contraventions have been abated during the year :—

Shops.

7 Insufficient watercloset accommodation.
6 No intervening ventilated space to sanitary conveniences.
1 Insufficient light to sanitary convenience.
9 Sanitary conveniences dirty or defective.
16 No proper washing facilities.
1 No proper meal facilities.
6 Insufficient seating accommodation.
3 Insufficient meal and rest hours.
2 Young persons employed above hours.
3 Insufficient half-holidays for assistants.
2 Insufficient ventilation.
2 Insufficient lighting.
32 Insufficient heating.
6 Not closing half-day weekly.
77 Proper records not being kept.
54 Seating accommodation form not displayed.
133 Form *re* Shops Acts provisions not displayed.

115 Notices *re* half-day closing not displayed.
8 Premises defective or dirty.
2 Defective sinks.
94 Notices *re* Sunday Partial Opening not displayed.
1 Insufficient compensatory holidays for Sunday employment.
4 Records *re* Sunday Employment not kept.
1 Not closing Sundays.

Offices.

2 Insufficient watercloset accommodation.

3 letters of warning were sent by the Town Clerk for contravention of the Shops (Hours of Closing) Act, 1928; in 2 other cases proceedings were taken and fines of 2/6d. and 5/- were imposed.

In 5 cases letters of warning were sent by the Town Clerk for the sale of goods in contravention of the Shops (Sunday Trading Restriction) Act, 1936; and in another case proceedings were taken and the case dismissed.

3 letters of warning were sent by the Town Clerk for contraventions of the Shops Act, 1912, regarding the sale of non-exempted articles on the early closing day.

1 letter of warning was sent by the Town Clerk for a contravention of the Shops Act, 1912, relating to the employment of assistants. Proceedings were taken against an employer for a similar contravention, and the case was dismissed.

1 letter of warning was sent by the Town Clerk for contraventions of the Shops Act, 1934, relating to the employment of Young Persons.

CAMPING SITES.

There are no authorised camping sites in this City.

SMOKE ABATEMENT.

95 smoke observations have been taken.

In 1 case black smoke issued for more than 2 minutes in the half-hour. The Manager was interviewed, and promised to give the matter immediate attention, and further observations taken were satisfactory.

SWIMMING BATHS.

There are 5 swimming baths within the Borough. 3 are open-air swimming baths, taking their supply of water direct from the river, the river either flowing directly through the bath or partly

diverted to flow through the bath. These baths are owned by the Local Authority. The other 2 swimming baths are covered-in baths and use the Corporation water supply. These 2 baths are privately owned.

The water of the open-air baths is not cleansed nor sterilised. During the winter the baths are cleansed and the vegetation of the sides and bottom of the baths is scraped off.

The water of the closed-in baths is cleansed by filtration and aeration and sterilised by the Chloramine process. The turnover period in both baths is 4 hours.

The following are summaries of the analyses of samples taken from the baths during the swimming season :—

Open-Air Baths.

Lakenham Bath.

10 samples were taken on 5 occasions for chemical and bacteriological analyses, and the bacteriological counts per c.c. were 520, 1360, 570, 720, 8500, 10,600, 6100, 1600, 41,000 and 50,000 respectively. B.Coli was found to be present in .001 c.c. in 2 samples, and in .01 c.c. in 5 samples, in 0.1 c.c. in 1 sample, and in 1 c.c. in 2 samples.

An analysis of water taken from the river above the baths in July disclosed that the river was badly polluted with foul matter, probably sewage, and the City Analyst reported that two samples of water taken from the baths at the same time showed that the water was not satisfactory for bathing purposes. The baths were closed temporarily and warning notices erected at points along the river between the Municipal Golf Course and Lakenham. Although investigations revealed that owing to a subsidence which had occurred at Earlham Road, the sewage from that area had been diverted into the surface water sewer which had its outfall in the river at a point near the Municipal Golf Course, some six miles distant, it seemed possible that the river was being polluted by sewage at another point.

Samples taken from the River and Baths in August, after rain, showed that the river and baths were polluted. The baths were again temporarily closed. From the investigations which were made it was thought that the cause of the pollution was the discharge into the river from a neighbouring surface water sewer. The matter was considered by the Health Committee, who informed the Parks and Gardens Committee that in their opinion the baths should not be used.

Eagle Baths (2 baths situated together and taking supply from same source).

5 samples were taken on 3 occasions for chemical and bacteriological analyses, and the bacteriological counts per c.c. were 260, 150, 1200, 720 and 2780 respectively. B.Coli was found to be present in 1 c.c. in 3 samples, in 0.1 c.c. in 1 sample, and in .01 c.c. in 1 sample.

Wensum Bath.

6 samples were taken on 3 occasions for chemical and bacteriological analyses, and the bacteriological counts per c.c. were 90, 140, 160, 80, 40 and 130 respectively. B.Coli was found to be present in 1 c.c. in 4 samples, and in 5 c.c. in 2 samples.

Covered-In Baths.

Private Swimming Bath A.

6 samples were taken on 3 occasions for chemical and bacteriological analyses, and the bacteriological counts per c.c. were 1930, 2950, Nil, 1, Nil and Nil respectively. B.Coli was absent in all samples in 35 c.c.

Private Swimming Bath B.

12 samples were taken on 6 occasions for chemical and bacteriological analyses, and the bacteriological counts per c.c. were 200, 3280, 7, 80, 40,000, uncountable, 5, 16, 7, 35, 8 and Nil respectively. B.Coli was absent in all samples in 35 c.c.

ERADICATION OF BED BUGS.

15 Council houses and 38 other houses were found during the year to be infested with bed bugs. All these were disinfested—6 Council houses which were seriously infested were fumigated with Hydrocyanic acid (H.CN.) gas, the work being done by a contractor under the supervision of the City Engineer. The fumigation of one of the remaining 9 Council houses was carried out by a private firm as a demonstration; the other houses were fumigated with Zaldecide by officers of the Health Department. Steps are taken to ensure that the belongings of families removing to Council houses, except Assisted Scheme houses, are free from vermin. 8 employees of the Corporation have been trained by a fumigation firm in the disinfestation of furniture. Three vans are used—one owned by the Corporation and two others hired with a driver and a packer from a contractor—and

the Corporation carry out the fumigation. Two of the Corporation's trained fumigators work on each of the hired vans and four on the Corporation's van. All furniture, bedding and other goods are collected in the morning, fumigated with H.CN. gas (Zyklon) and, except bedding, delivered gas free the same evening to the new house. Bedding and padded furniture which is liable to retain traces of gas for some time is kept until proved absolutely free of gas. Accommodation bedding is lent to tenants until their own is returned. Owing to limited accommodation for airing purposes, some bedding is disinfested by steam instead of gas, in which case it is returned the same day. All Council houses are inspected by the rent collectors six months after the commencement of the tenancy. Tenants found to have a low standard of cleanliness are re-visited frequently by the collector who makes every effort to effect an improvement. The houses, furniture and bedding are carefully examined for the presence of bugs. All tenants are advised not to collect wood from demolished houses for firewood or to buy secondhand furniture. One house in which the tenant's furniture was fumigated with H.CN. gas on removal has been found to be infested; this infestation may have taken place prior to the new tenant entering into occupation.

SCHOOLS.

The sanitary condition and water supply of the schools are dealt with on page 142, and infectious diseases in the schools receive comment on pages 171-174.

HEALTH EDUCATION.

Education on health matters is provided at the Infant Welfare Centres, Maternity Home and School Clinics, by the visits of the Health Visitors to the homes, and by the distribution of pamphlets; instruction in hygiene is given in the schools.

The Health Committee has also entered into arrangement for the supply of 2000 copies per month of "Better Health," free of charge, for distribution amongst the citizens.

HOUSING.

Slum Clearance Operations.

During the year, 12 Areas were declared to be Clearance Areas by the Council and 3 of these Areas were dealt with partly by means of Compulsory Purchase Orders and partly by means of Clearance Orders. The remaining 9 Areas were dealt with by 4 Compulsory Purchase Orders and 5 Clearance Orders. The number of houses involved was 561, with a population of 1527. In addition, 5 Clearance Orders and 7 Compulsory Purchase Orders were made on Areas declared to be Clearance Areas in 1937. 25 Public Inquiries were held by the Minister of Health. The Minister confirmed 29 Orders (8 with modifications). 1 of these Orders was made in 1936, 23 in 1937, and 5 in 1938. The Minister of Health also intimated that 2 Clearance Areas comprising Corporation property only had been properly represented. The number of houses in the confirmed Orders and in the 2 Areas consisting of Corporation property was 578, with a population of 1755. The Minister's decisions in 5 Public Inquiries have not yet been received. Re-housing from the Areas is proceeding.

The Orders made in 1938 were as follows :—

Clearance Orders.

		In Clearance Areas. Houses.	Population.	In Confirmed Orders. Houses. Population.
Shadwell Street ...	(c)	8	11	Not yet confirmed.
Gipson Buildings ...	..	13	39	Do.
Holls Lane ...	(a)	6	17	Do.
10—14 Hall Road ...		4	14	Do.
92—96 King Street ...		18	41	Do.
1—5 Lily Terrace ...		5	17	Do.
Woods Yard, Mariners Lane		23	65	Do.
Abbey Lane		29	81	Do.

Compulsory Purchase Orders.

		In Clearance Areas. Houses.	Population.	In Confirmed Orders. Houses. Population
Shadwell Street ...	(a)	339	938	Do.
Shadwell Street ...	(b)	2	7	Do.
Holls Lane ...	(a)	19	47	Do.
Holls Lane ...	(b)	5	16	Do.
92—96 King Street ...		9	23	Do.
Rose Yard, St. Augustines Street		72	183	Do.
Woods Yard, Mariners Lane		9	28	Do.
Totals ...		561	1527	

GRAPH SHEWING THE NUMBER OF HOUSES ERECTED IN NORWICH FROM 1897 TO 1938

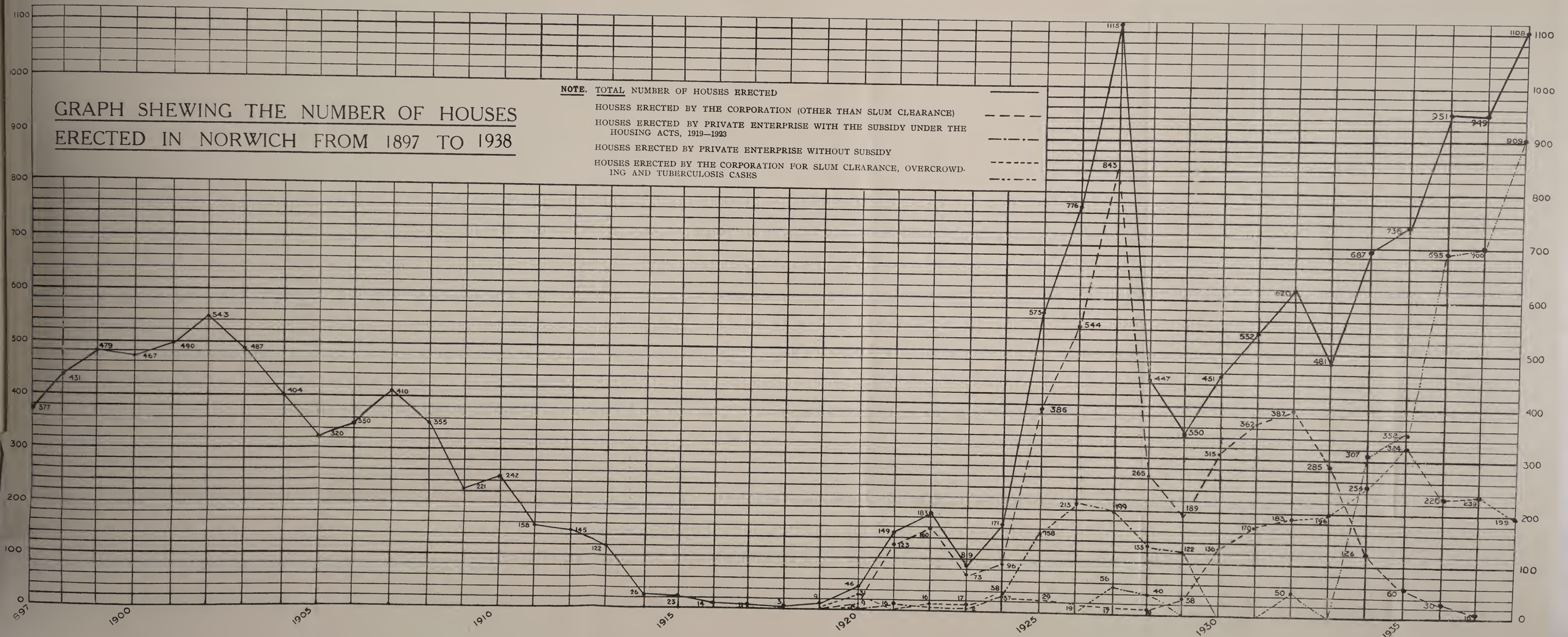
NOTE. TOTAL NUMBER OF HOUSES ERECTED

HOUSES ERECTED BY THE CORPORATION (OTHER THAN SLUM CLEARANCE)

HOUSES ERECTED BY PRIVATE ENTERPRISE WITH THE SUBSIDY UNDER THE HOUSING ACTS, 1919—1923

HOUSES ERECTED BY PRIVATE ENTERPRISE WITHOUT SUBSIDY

HOUSES ERECTED BY THE CORPORATION FOR SLUM CLEARANCE, OVERCROWDING AND TUBERCULOSIS CASES



The following Orders were confirmed, some with modifications, during the year :—

Clearance Orders.	In Clearance Areas. Houses.	In Clearance Areas. Population.	In Confirmed Orders. Houses.	In Confirmed Orders. Population.
43—51 Spitalfields ...	6	10	6	10
59—61 Ketts Hill... ...	2	11	2	11
63—67 Spitalfields ...	3	12	3	12
7—13 Pigg Lane	9	16	9	16
9—13 Palace Street ...	15	26	15	26
10—24 Quayside	16	58	8	58
Hooks Yard, Colegate ...	16	49	15	43
All Saints Alley	5	20	5	20
Foundry Bridge Buildings ...	12	33	12	35
Chapel Yard, etc., Botolph Street	16	37	16	37
Rayners Yard, etc., King Street	13	33	13	33
Selfs Yard, etc., St. Benedicts Street	14	37	14	37
Little White Horse Yard, Botolph Street	6	15	6	15
Fountain Yard, Botolph Street	5	17	5	17
Ten Bell Lane, etc. ...	19	54	19	54
Cross Keys Yard, etc., Magdalen Street ...	13	53	13	53
Watsons Court, etc., King Street	10	21	10	21
Bretts Yard, etc., Heigham Street (1)	18	57	18	57
Turners Square, etc., Rose Lane	33	65	33	65
Compulsory Purchase Orders.				
1—23 Ketts Hill, etc. ...	16	51	16	51
31—53 Ketts Hill, etc. ...	24	69	24	69
2—12 Bedding Lane ...	7	19	7	19
Pyes Yard, St. Martin-at-Palace Plain	15	52	22	72
220—246 Heigham Street, etc.	19	59	19	59
Foundry Bridge Buildings ...	2	11	2	11
Thorn Lane, etc.	130	401	129	401
304—312 Heigham Street, etc.	12	28	12	28
90—104 Ber Street ...	17	59	19	73
Peacock Street and Cowgate Re-development Area ...	78	251	100	337
	551	1624	572	1740

Corporation Property—No orders made.

	In Clearance Areas. Houses.	Population.	Houses.	Population.
1—4 Lime Kiln Cottages, Marston Lane	4	10	4	10
10—12 Lime Kiln Cottages, Marston Lane	2	5	2	5
Totals ...	557	1639	578	1755

In some of the confirmed Compulsory Purchase Orders, property fit for human habitation, but which was considered reasonably necessary to acquire for the satisfactory development or use of the site, is included.

Demolition and Closing of Insanitary Premises.

Action under Sections 11 and 12 of the Housing Act, 1936, was taken as follows:—

Demolition Orders	67
Closing Orders	32
Undertakings not to re-let ...	40
Individual Unfit Houses dealt with	139

The total number of Individual Unfit Houses dealt with up to the end of 1938 is 736—352 Demolition Orders, 267 Closing Orders and 117 Undertakings. 105 families were displaced from Individual Unfit Houses during the year. 3 of these were under Orders made in 1936; 32 under Orders made in 1937; 67 under Orders made in 1938; and 3 families were re-housed in 1938 as emergency cases.

Houses for persons suffering from Tuberculosis.

Prior to 1935, 38 houses, erected under the 1924 Act, were allocated to the Health Committee for re-housing families in which a member was suffering from Tuberculosis. In 1935 the Council approved the erection of a further 50 houses for the tuberculous. These houses have been completed, but as it was considered undesirable to establish a "Colony" of such families, the 50 houses were taken over by the Housing Committee for general re-housing, and 50 tuberculous families re-housed on the various Corporation Estates. The Housing Committee continues to treat most sympathetically all recommendations brought to their notice for preferential re-housing of the tuberculous.

During the year, 15 tuberculous families were re-housed on the recommendation of the Medical Officer of Health to the Housing Committee.

Rent Rebates.

The Council, in pursuance of their powers under the Housing Acts, grant rent rebates in accordance with an approved income scale to tenants of non-parlour houses and flats. The maximum rebates are as follows :—

Maximum Rebates.

		s.	d.
1-bedroomed Flat		Nil	
2- Do. Do.		1	0
3- Do. Non-Parlour		2	6
4- Do. Do.		4	0
5- Do. Do.		6	0
6- Do. Do.		8	0

The grant of a rebate applies also to the re-housing of cases of Tuberculosis.

Overcrowding.

Particulars of overcrowding and the action taken are referred to on page 51.

Statistics.

No. of new houses erected during the year :—

(1) By the Local Authority :—	
(*a*) Direct Labour	466
(*b*) Contract	443
(2) By other bodies and persons	199

1. Inspection of Dwelling-houses.

(1) (*a*) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	4452
(*b*) Number of inspections made for the purpose	11955
(2) (*a*) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 ...	1526
(*b*) Number of inspections made for the purpose	5781
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ...	139
(4) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ...	1972

2. Remedy of Defects during the Year without Service of Formal Notices.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers (including 254 in respect of which notices were served in 1937, and rendered fit in 1938)	1750

3. Action under Statutory Powers.

A.—Proceedings under Sections 9, 10 *and* 16 *of the Housing Act,* 1936.

(1) Number of dwelling-houses in respect of which notices were served requiring repairs ...	83
(2) Number of dwelling-houses which were rendered fit after service of formal notices:—	
(*a*) By owners (including 39 in respect of which notices were served in 1937, and rendered fit in 1938) ...	45
(*b*) By Local Authority in default of owners	17

B.—Proceedings under Public Health Acts.

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	195
(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
(*a*) By owners (including 117 in respect of which notices were served in 1937, and remedied in 1938) ...	168
(*b*) By Local Authority in default of owners	12

C.—Proceedings under Sections 11 *and* 13 *of the Housing Act,* 1936.

(1) Number of dwelling-houses in respect of which Demolition Orders were made	67
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	69

D.—Proceedings under Section 12 of the Housing Act, 1936.

(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	32
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	3

4. Housing Act, 1936—Part IV—Overcrowding.

(*a*)	(1)	Number of dwellings overcrowded at the end of the year	306
	(2)	Number of families dwelling therein ...	306
	(3)	Number of persons dwelling therein ...	2327
(*b*)		Number of new cases of overcrowding reported during the year	75
(*c*)	(1)	Number of cases of overcrowding relieved during the year	379
	(2)	Number of persons concerned in such cases	2645
(*d*)		Particulars of any cases in which dwelling-houses have again become overcrowded after the Local Authority have taken steps for the abatement of overcrowding ...	Nil.

(*e*) Any other particulars with respect to overcrowding conditions upon which the Medical Officer of Health may consider it desirable to report.

It is desirable again to point out that the standard of overcrowding laid down in the Housing Act is a very poor one, and it can only be hoped that at some future date this standard will be improved.

INSPECTION AND SUPERVISION OF FOOD.

(*a*) Milk Supply.

WHOLESOMENESS AND DISTRIBUTION.

The quality of the milk from a chemical standpoint has been good.

Some of the milk is produced withing the City boundary; a quantity comes in by rail; but by far the greater portion comes in by road from the districts surrounding Norwich. The type of premises used for storing continues to improve.

The quantity of milk consumed by the population shows an increase, the figures being as follows:—

Average number of pints per week sold in November, 1937 (174 returns received from milk-sellers)	394,409
Average number of pints per week sold in November, 1938 (154 returns received from milk-sellers)	403,637

This shows an increase of 9228 pints of milk per week, and the approximate average of .47 pints of milk per day per person in the City.

Cowkeepers—		
Number on Register		6
Approximate number of cows ...		192
Retail Milk Purveyors—		
Number on Register—		
Residing in the City ...	97	
Residing outside the City	74	
	—	171
Number of Inspections of Dairies, Cow-sheds, and Milk-shops		707

MILK AND DAIRIES ORDER, 1926.

No cases were taken under the above Order.

MILK (SPECIAL DESIGNATIONS) ORDERS, 1936 AND 1938.

The standards required by the Milk (Special Designations) Order, 1936, are :—

"Tuberculin Tested" and "Accredited"	Shall satisfy a methylene blue reduction test, and shall be found to contain no coliform bacillus in one-hundredth of a millilitre. A sample taken at any date from the 1st May to the 31st October, shall be regarded as satisfying the methylene blue reduction test if it fails to decolourise the methylene blue in $4\frac{1}{2}$ hours, and a sample taken at any date from the 1st November to the 30th April shall be regarded as satisfying the test if it fails to decolourise the methylene blue in $5\frac{1}{2}$ hours.
"Pasteurised" ...	Not more than 100,000 bacteria per millilitre.

The average number of pints of graded milks sold weekly during the year were :—

"Tuberculin Tested"	8,404
"Accredited"	29,434
"Pasteurised"	172,618

This shows a decrease in relation to "Tuberculin Tested" and "Accredited" milks, but a large increase in "Pasteurised" milk.

The following licences were granted :—

Producers—

"Accredited"	2

Retailers—

"Tuberculin Tested"	14
"Accredited"	10
"Pasteurised"	2

61 samples of "Tuberculin Tested" and 245 of "Accredited" milk were bacteriologically examined.

4 samples of "Tuberculin Tested" and 18 samples of "Accredited" milk failed to pass the Methylene Blue test, and 7 samples of "Tuberculin Tested" and 30 samples of "Accredited" milk failed to pass the B.Coli test.

In all cases, letters of warning were sent to the vendors.

50 samples of "Pasteurised" milk were examined bacteriologically and 49 were found to be satisfactory. A letter of warning was sent to the vendor of the unsatisfactory sample. 52 samples were submitted to the Phosphatase test and were found to be satisfactory.

In an effort to improve the standard of the designated milks which are being retailed in the City, the Health Committee decided to consider the question of the revocation of the licence in cases where a reasonable number of samples of designated milk has been taken, and the unsatisfactory samples exceeds 25%. All vendors of designated milk were notified to this effect in 1937.

In November the Health Committee decided to revoke a retailer's licence for "Tuberculin Tested" milk. The retailer has appealed to the Ministry of Health, and the result of the appeal is still pending.

Bacteriological Examination of Ordinary Milk.

42 samples of ordinary milk were bacteriologically examined under the graded milk standards, and 15 failed to pass these tests. 4 samples of milk were examined for the presence of dirt, and were certified as clean milks. It is as well to point out that a considerable quantity of milk is pasteurised unofficially, or preheated, and no intimation given to the public.

The table on page 55 shows the results of the bacteriological examinations of the samples of milk from each retailer, and enables comparisons easily to be made.

Ordinary.

351 samples were taken from milk supplied by producers residing outside the City for examination by animal inoculation for the presence of tubercle bacilli. 8 samples were positive (2.3%) ; 7 of these samples concerned 9 producers, and the cases were referred to the County Medical Officer of Health. This Officer informed me that 6 tuberculous cows were traced and slaughtered; 1 case was not completed at the end of the year. 1 of the positive samples was taken from mixed milks, and further samples taken from separate producers gave negative results. In 3 cases the County Medical Officer reported that the results of the examination of the samples taken by his Department were negative. In the outstanding case at the end of 1937 the result was negative.

35 samples were taken from milk producers in the City for similar examination. 6 samples (17.1%) were found to contain tubercle bacilli. 4 of the samples concerned one producer. The

Retailer.		For both tests.					For M.B. test only.			For B.Coli test only.			Total.				Percentage unsatisfactory.
		No.	Satisfactory.	Unsatisfactory.			No.	Satisfactory.	Unsatisfactory.	No.	Satisfactory.	Unsatisfactory.	No. submitted.	Unsatisfactory.			
				Both.	Meth. Blue.	B.Coli.								Both.	Meth. Blue	B.Coli	
Tuberculin Tested.	"A"	6	6	...	...	...	4	4	...	1	1	...	11	...	..	...	0.0%
	"B"	5	4	...	...	1	7	7	...	...	...	...	12	...	...	1	8.3%
	"C"	2	2	...	...	...	...	...	...	...	...	...	2	..	...	...	0.0%
	"D"	12	9	1	1	1	5	5	...	...	...	.	17	1	1	1	17.6%
	"E"	5	4	1	...	...	1	1	...	...	...	...	6	1	...	...	16.7%
	"F"	1	1	...	...	...	1	1	...	...	...	...	2	...	...	...	0.0%
	"G"	5	2	1	...	2	4	4	...	...	...	...	9	1	...	2	33.3%
	"H"	...	...	...	...	...	1	1	...	...	...	...	1	...	...	...	0.0%
	"I"	1	1	...	...	...	...	...	...	...	..	...	1	...	...	...	0.0%
TOTALS ...		37	29	3	1	4	23	23	...	1	1	...	61	3	1	4	13.1%
Accredited.	"A"	18	15	1	1	1	1	1	...	...	...	..	19	1	1	1	15.8%
	"B"	8	8	...	...	...	3	3	...	1	1	...	12	...	...	...	0.0%
	"C"	4	4	...	...	...	4	4	...	3	3	...	11	...	...	...	0.0%
	"D"	2	1	1	...	...	...	...	...	...	...	...	2	1	...	...	50.0%
	"E"	8	5	2	...	1	2	2	..	1	1	...	11	2	...	1	27.3%
	"F"	4	4	...	...	...	8	8	...	...	...	..	12	...	...	..	0.0%
	"G"	6	5	...	...	1	4	4	. .	2	2	...	12	...	...	1	8.3%
	"H"	10	6	..	1	3	5	5	...	...	...	...	15	...	1	3	26.7%
	"I"	43	33	2	1	7	46	43	3	6	6	...	95	2	4	7	13.7%
	"J"	13	11	2	...	...	1	...	1	...	...	...	14	2	1	...	21.4%
TOTALS ...		116	92	8	3	13	74	70	4	13	13	...	203	8	7	13	13.8%
Ordinary ...		34	20	5	2	7	6	5	1	2	2	...	42	5	3	7	35.7%
City-Producer :— Accredited ...		30	20	2	1	7	1	1	...	...	...	...	31	2	1	7	32.3%

first of these samples was from a mixed milk, and in consequence 12 group and 4 separate samples were taken. 1 group sample gave a positive result, and the case was referred to the Divisional Inspector of the Ministry of Agriculture and Fisheries who reported that 2 cows had been traced and slaughtered. 2 of the other positive samples from this producer were taken whilst the previous case was being dealt with. The fourth positive result has been referred to the Divisional Inspector of the Ministry of Agriculture and Fisheries and was still proceeding at the end of the year. The other 2 positive samples concerned 1 producer and these were referred to the Divisional Inspector of the Ministry of Agriculture and Fisheries who reported that 2 cows had been traced and slaughtered.

THE MILK AND DAIRIES (CONSOLIDATION) ACT, 1915, AND THE MILK AND DAIRIES (AMENDMENT) ACT, 1922.

No proceedings were taken under these Acts.

(*b*) Meat and other Foods.

Frequent inspections of retail butchers' shops and market stalls are made by the Inspectors. All meat found to be diseased and unfit for food is collected and disposed of at the Harford Refuse Tip by burial in quicklime. The tables on pages 58-61 show the quantity of meat which has been destroyed as being unfit for human food.

MARKETS.

The Fish Market has been visited and inspected frequently.

The Inspectors are on duty on market days at varying times for the purpose of inspecting the meat, poultry, fish, fruit, vegetables, and other foods, etc., exposed for sale at the Provision Market. On occasions it has been found necessary to deal with various articles of food which were unfit for human consumption.

SLAUGHTER OF ANIMALS ACT, 1933.

Six slaughtermen were granted licences during the year to slaughter or stun animals in a slaughter-house or knacker's yard under the Slaughter of Animals Act, 1933. The total number of registered slaughtermen on the 31st December, 1938, was 108.

SLAUGHTER-HOUSES.

	In 1920.	In Dec., 1937.	In Dec., 1938.
Registered ...	13	10	11
Licensed ...	18	16	15
Totals ...	31	26	26

Carcases Inspected and Condemned.

The following table shows the approximate number of killings in the slaughter-houses, and the number of carcases inspected and found to be affected with disease during the year :—

	Cattle (excluding Cows).			Cows.	Calves.	Sheep and Lambs.	Pigs.
	Bulls and Bullocks.	Heifers.	Total.				
Number killed (approx.) ...	8335				145	12076	40628
Number inspected	3579	1114	4693	195	84	6784	13819
All diseases except Tuberculosis—							
Whole carcases condemned ...	2	1	3	—	—	5	34
Carcases of which some part or organ was condemned	747	121	868	46	—	35	404
Percentage of the number inspected affected with disease other than tuberculosis ...	20.92%	10.95%	18.56%	23.59%	0.0%	0.59%	3.17%
Tuberculosis only—							
Whole carcases condemned ...	23	10	33	8	1	—	30
Carcases of which some part or organ was condemned	716	140	856	89	5	—	655
Percentage of the number inspected affected with tuberculosis ...	20.65%	13.46%	18.94%	49.74%	7.14%	0.0%	4.96%

CARCASES, PARTS OF CARCASES AND ORGANS EXAMINED, CONDEMNED AND DESTROYED FOR DISEASES OTHER THAN TUBERCULOSIS.

Kind of Animal.	Disease or Condition.	Whole Carcases and Offals.	Fore-quarters.	Hind-quarters	Dia-phragms.	Hearts.	Heads.	Kidneys.	Livers.	Lungs.	Mesenteric Fats.	Meat, lbs.	Spleens.	Stomachs.	Tongues.	Omenta.	Udders.
Cattle	Abscesses ...	—	—	—	6	—	3	—	174	13	—	4	—	—	3	—	—
	Actinomycosis ...	1	—	—	—	—	154	—	—	4	—	—	—	—	155	—	—
	Angiomatosis ...	—	—	—	—	—	—	—	19	—	—	—	—	—	—	—	—
	Bruising	—	—	—	—	—	—	—	—	—	—	46	—	—	—	—	—
	Cirrhosis	—	—	—	—	—	—	—	114	—	—	—	—	—	—	—	—
	Cystic	—	—	—	—	—	—	19	1	6	7	—	—	—	—	—	—
	Damaged by fire ...	—	—	—	—	—	—	—	—	—	—	108	—	—	—	—	—
	Decomposition ...	—	2	—	1	1	—	—	3	1	—	257	2	—	—	—	—
	Distomatosis ...	—	—	—	—	—	—	—	107	3	—	—	—	—	—	—	—
	Emaciation ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Fatty Degeneration	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—
	Hæmorrhage ...	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—
	Infarcts	—	—	—	—	—	—	17	—	—	—	—	—	—	—	—	—
	Inflammation ...	—	—	—	1	—	—	—	4	2	1	—	8	1	1	—	—
	Mastitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
	Melanosis	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—
	Necrosis	—	—	—	—	—	—	—	6	—	—	—	—	—	—	—	—
	Nephritis	—	—	—	—	—	—	8	—	—	—	—	—	—	—	—	—
	Pentastomum Denticulatum	—	—	—	—	—	—	—	1	—	27	—	—	—	—	—	—
	Pericarditis ...	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—
	Peritonitis ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Pleurisy	—	—	—	3	—	—	—	—	11	—	—	—	—	—	—	—
	Pneumonia ...	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—
	Tumour	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—

Sheep	Abscesses	—	—	—	—	—	—	—	—	1	—	7	—	—	—	—	—	
	Bruising	—	—	—	—	—	—	—	—	—	—	42	—	—	—	—	—	
	Congestion ...	—	—	—	—	9	—	—	9	10	—	—	9	—	—	—	—	
	Cystic	—	—	—	—	—	—	—	8	1	—	—	—	—	—	—	—	
	Emaciation ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Fevered	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Insufficiently bled ...	—	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Moribund ...	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Pericarditis ...	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	
	Pleurisy	—	—	—	—	—	—	—	—	4	—	—	—	—	—	—	—	
	Pneumonia ...	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	
	Strongyles ...	—	—	—	—	—	—	—	3	8	—	—	—	—	—	—	—	
	Uræmia	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Pigs	Abscesses	1	—	—	—	—	4	—	1	—	3	24	—	—	4	—	—	
	Bruising	—	—	—	—	—	—	—	—	—	—	10	—	—	—	—	—	
	Cirrhosis	—	—	—	—	—	—	—	94	—	—	—	—	—	—	—	—	
	Congenital Cystic Kidney ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Congestion ...	—	—	—	—	—	—	1	2	73	—	—	—	—	—	—	—	
	Cystic	—	—	—	—	—	—	4	7	2	1	—	—	—	—	—	—	
	Damaged by fire ...	—	—	—	—	—	—	—	—	—	—	78	—	—	—	—	—	
	Decomposition ...	1	—	—	—	2	—	—	3	11	6	—	—	—	—	—	—	
	Emaciation ...	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Endocarditis ...	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	
	Enteritis	1	—	2	—	—	—	—	—	—	13	—	—	—	—	—	—	
	Fevered	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Fibrosis	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	—	
	Hæmorrhage ...	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	
	Infarcts	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	
	Inflammation ...	—	—	—	—	6	1	—	34	—	3	—	1	—	1	—	—	
	Injury	—	—	—	—	—	—	—	—	—	—	20	—	—	—	—	—	
	Carried forward ...	18	6	2	11	22	162	52	595	153	61	596	21	1	164	—	2	

CARCASES, PARTS OF CARCASES AND ORGANS EXAMINED, CONDEMNED AND DESTROYED FOR DISEASES OTHER THAN TUBERCULOSIS—*continued.*

Kind of Animal.	Disease or Condition.	Whole Carcases and Offals	Fore-quarters.	Hind-quarters.	Dia-phragms.	Hearts.	Heads.	Kidneys.	Livers.	Lungs.	Mesenteric Fats.	Meat, lbs.	Spleens.	Stomachs.	Tongues.	Omenta.	Udders.
	Brought forward ...	18	6	2	11	22	162	52	595	153	61	596	21	1	164	—	2
Pigs	Necrosis	—	—	—	—	—	—	2	5	—	—	—	—	—	—	—	—
	Neoplasm ...	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—
	Nephritis	—	—	—	—	—	—	7	—	—	—	—	—	—	—	—	—
	Œdema	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Pericarditis ...	—	—	—	—	37	—	—	—	—	—	—	—	—	—	—	—
	Peritonitis ...	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Pleurisy	4	3	—	—	9	—	—	—	51	—	—	—	—	—	—	—
	Pneumonia ...	—	1	—	1	12	—	—	—	116	—	—	—	—	—	—	—
	Pyæmia	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Septicæmia ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Strongyles ...	—	—	—	—	—	—	—	—	8	—	—	—	—	—	—	—
	Swine Erysipelas ...	12	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Tumour	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—
	Totals ...	42	10	2	12	80	163	61	600	328	62	596	21	1	165	—	2

CARCASES, PARTS OF CARCASES AND ORGANS EXAMINED, CONDEMNED AND DESTROYED FOR TUBERCULOSIS.

Kind of Animal.	Whole Carcases and Offals.	Fore-quarters.	Hind-quarters.	Dia-phragms.	Hearts.	Heads.	Kidneys.	Livers.	Lungs.	Mesen-teric Fats.	Meat, lbs.	Spleens.	Stomachs.	Tongues.	Omenta.	Udders.
Cattle	41	31	5	12	8	339	15	163	577	304	859	7	1	340	2	—
Calves	1	—	—	—	1	3	—	1	2	—	—	—	—	3	—	—
Sheep	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pigs	30	9	3	3	61	320	3	86	89	430	282	5	—	320	—	—
Totals	72	40	8	15	70	662	18	250	668	734	1141	12	1	663	2	—

SUMMARY.

Tuberculosis	72	40	8	15	70	662	18	250	668	734	1141	12	1	663	2	—
Other Diseases	42	10	2	12	80	163	61	600	328	62	596	21	1	165	—	2
Totals	114	50	10	27	150	825	79	850	996	796	1737	33	2	828	2	2

5835 visits have been paid to slaughter-houses; they are visited as far as practicable on killing dates.

Proceedings were taken against 8 butchers under Section 116 of the Public Health Act, 1875 for having in their possession, and exposed for sale, meat unsound and unfit for human consumption. In 7 cases fines of £1. 10s. 0d.; £1. 10s. 0d.; 10/-; £2; £5; £5; and £5 respectively were inflicted; the other case was dismissed.

In three cases proceedings were instituted for failing to notify evidence of disease during slaughter, under the Meat Regulations, 1924, and fines of £10; £10; and 10/- respectively were inflicted.

OTHER FOODS EXAMINED, CONDEMNED AND DESTROYED, AS BEING UNSOUND AND UNFIT FOR HUMAN CONSUMPTION.

FISH :—

178	stones of various kinds of fish.	94	pounds of mussels.
		1	box of prawns.

OTHER ARTICLES :—

132	pounds of bacon.	1	Cornish pasty.
26	rabbits.	66	pork pies.
7	chickens.	60	saveloys.
44	pounds of sausages.	6½	stones of mushrooms.
25	pounds of suet.	3	tins of corned beef.
5½	pounds of pressed cheek.	1	tin of beef.
		1	tin of ox tongue.

Proceedings were instituted against a firm for having exposed an unsound pasty for sale, and a fine of £1 was inflicted.

MERCHANDISE MARKS ACT, 1926.

No proceedings were taken for contraventions of Orders made under the above Act.

BAKEHOUSES.

Number of Bakehouses on register	...	111
Visits paid to Bakehouses		580

Cleansing and limewashing have been carried out during the months of April and October, and the premises have been found to be kept in as reasonably a satisfactory condition as there are powers to enforce. During the past year, a further number

of bakehouses have been improved by the provision of suitable washing-up sinks with a sufficient supply of hot water, together with an adequate supply of soap and towels for the use for toilet purposes of persons employed therein, and proper accommodation for the storage of fuel. The attention of occupiers has, on many occasions, been drawn to the dirty state of the premises, and improvement is still being shown in this direction.

MARGARINE.

The necessary inspections have been made of premises to see if margarine was sold, and, where such was the case, to see that the requirements of the Food and Drugs (Adulteration) Act, 1928, relating to margarine, were carried out.

TRANSPORT OF FOOD.

In 23 cases proceedings have been instituted for contraventions of the byelaws for promoting and securing sanitary and cleanly conditions in the transport of any article intended to be sold for food, made under Section 82 of the Norwich Corporation Act, 1933, with the following results:—

In 4 cases fines of 2/6d. were inflicted.
In 8 cases fines of 5/- were inflicted.
In 3 cases fines of 10/- were inflicted.
1 case was dismissed on payment of 4/- costs.
3 cases were dismissed with cautions.
3 cases were dismissed.
1 case was withdrawn.

23

Several persons were also warned for a primary contravention of these byelaws.

(c) **Adulteration.**

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

During the year, 414 samples of food and drugs were submitted for analysis. This number is inclusive of 100 samples which were taken informally. Details of the samples taken are shown in the tables on pages 68-71.

In addition to these, 541 samples of milk were tested informally by the Gerber process; 64 were not up to standard, and subsequent formal samples were submitted to the Public Analyst for analysis, 27 of which were certified "Not Genuine".

The following actions were taken against vendors :—

Case. No.	Article.		Offence.	Fine.	Costs.	Other Action.
1	Milk ...	4%	Deficient in milk fat	—	—	Cautioned.
2	,, ...	3%	Do. ...	—	—	Do.
3	,, ...	10%	Do. ...	1/-	15/-	—
(*a*) 4	,, ...	14%	Added water ...	—	—	No action.
(*a*) 5	,, ...	8·5%	Do. ...	40/-	31/3d.	—
(*a*) 6	,, ...	38·6%	Do. ...	100/-	31/3d.	—
7	,, ...	11%	Deficient in milk fat	20/-	15/-	—
8	,, ...	4%	Do. ...	—	—	Cautioned.
9	,, ...	8%	Do. ...	—	—	Dismissed.
10	,, ...	6%	Do. ...	—	19/-	Do.
11	,, ...	2%	Do. ...	—	—	Cautioned.
12	,, ...	2%	Do. ...	—	—	Do.
13	,, ...	5%	Do. ...	20/-	15/-	—
14	,, ...	10%	Do. ...	—	—	Dismissed.
(*b*) 15	,, ...	13%	Do. ...	—	—	Cautioned.
16	,, ...	6%	Do. ...	—	—	Dismissed.
(*d*) 17	,, ...	5%	Do. ...	—	—	No action.
(*b*) 18	,, ...	6%	Do. ...	—	—	Do.
(*b*) 19	,, ...	5%	Do. ...	—	—	Do.
(*c*) 20	,, ...	9%	Do. ...	—	—	Do.
(*d*) 21	,, ...	33%	Do. ...	—	—	Do.
(*d*) 22	,, ...	14%	Do. ...	—	—	Do.
(*d*) 23	,, ...	5%	Do. ...	—	—	Do.
(*d*) 24	,, ...	24%	Do. ...	—	—	Do.
(*c*) 25	,, ...	5%	Do. ...	—	—	Do.
(*d*) 26	,, ...	31%	Do. ...	—	—	Do.
(*d*) 27	,, ...	26%	Do. ...	—	—	Do.
(*d*) 28	,, ...	30%	Do. ...	—	—	Do.
(*d*) 29	,, ...	7%	Do. ...	—	—	Do.
30	,, ...	2%	Do. ...	—	—	Cautioned.
31	,, ...	3%	Do. ...	—	—	Do.
32	,, ...	2%	Do. ...	—	—	Do.
33	,, ...	3%	Do. ...	—	—	Do.
34	,, ...	5%	Do. ...	5/-	15/-	—
35	,, ...	6%	Do. ...	20/-	15/-	—
36	,, ...	8%	Do. ...	—	—	Dismissed.
(*e*) 37	,, ...	11%	Do. ...	—	—	No action.
(*f*) 38	,, ...	10%	Added water ...	—	—	Do.
(*e*) 39	,, ...	13%	Deficient in milk fat	—	—	Dismissed.
(*e*) 40	,, ...	14%	Do. ...	—	—	Do.
(*f*) 41	,, ...	16¾%	Added water ...	—	—	No action.
(*f*) 42	,, ...	18½%	Do. ...	—	—	Do.

Case. No.	Article.		Offence.	Fine.	Costs.	Other Action.
43	,, ...	4%	Deficient in milk fat	—	—	Cautioned.
44	,, ...	3%	Do. ...	—	—	Do.
(*g*) 45	,,	16%	Do. ...	—	—	No action.
		$7\frac{1}{2}$%	Added water ...			
(*f*) 46	,, ...	12%	Do. ...	20/-	15/-	—
(*f*) 47	,, ...	$11\frac{3}{4}$%	Do. ...	20/-	15/-	—
(*f*) 48	,, ...	$17\frac{1}{4}$%	Do. ...	20/-	15/-	—
(*f*) 49	,, ...	$8\frac{1}{2}$%	Do. ...	20/-	15/-	—
(*f*) 50	,, ...	7%	Do. ...	20/-	15/-	—
(*g*) 51	,, ...	$8\frac{1}{2}$%	Do. ...	—	—	No action.
52	,, ...	3%	Deficient in milk fat	—	—	Cautioned.
53	,, ...	25%	Do. ...	40/-	15/-	—
(*h*) 54	,, ...	16%	Do. ...	—	—	No action.
(*h*) 55	,, ...	20%	Do. ...	—	—	Do.
(*i*) 56	,, ...	5%	Do. ...	—	—	Do.
57	,, ...	17%	Do. ...	—	—	*Defendant died.*
(*i*) 58	,, ...	3%	Do. ...	—	—	Cautioned.
(*i*) 59	,, ...	2%	Do. ...	—	—	Do.
(*h*) 60	,, ...	15%	Do. ...	—	—	No action.
(*h*) 61	,, ...	6%	Do. ...	—	—	Do.
(*h*) 62	,, ...	6%	Do. ...	—	—	Do.
63	Butter	5·6%	Excess water ...	1/-	15/-	—
64	Iodine	100%	Deficient in Pot.	—	—	Cautioned.
	Oint-ment	Iodine				
		15%	Deficient in Iodine			
65	Butter	11·8%	Excess water ...	20/-	15/-	—

(*a*) Nos. 5 and 6 taken in course of delivery *re* No. 4.
(*b*) Nos. 18 and 19 appeal to cow samples *re* No. 15.
(*c*) No. 25 taken in course of delivery *re* No. 20.
(*d*) Nos. 21-24 taken in course of delivery *re* No. 17; Nos. 26-29 appeal to cow samples *re* Nos. 21-24.
(*e*) Nos. 39-40 taken in course of delivery *re* No. 37.
(*f*) Nos. 41, 42, 46, 47, 48, 49 and 50 taken in course of delivery *re* No. 38.
(*g*) No. 51 taken in course of transit *re* No. 45. Appeal to cow sample certified genuine but doubtful owing to low ash and specific gravity.
(*h*) No. 55 sample from wholesaler *re* No. 54. Nos. 60 and 61 taken in course of transit *re* No. 55. No. 62 appeal to cow.
(*i*) Nos. 58-59 taken in course of transit *re* No. 56.

Proceedings were instituted against a firm for having premises on which, by way of trade, butter is blended, and the premises not being registered with the Food and Drugs Authority as required by Section 8 of the Food and Drugs (Adulteration) Act, 1928, and a fine of 10/- was inflicted.

THE PUBLIC HEALTH (DRIED MILK) REGULATIONS, AND THE PUBLIC HEALTH (CONDENSED MILK) REGULATIONS, 1923 and 1927.

5 informal samples were taken under these regulations, and certified "Genuine."

ARTIFICIAL CREAM ACT, 1929.

There are 4 premises registered with the Local Authority, where artificial cream is manufactured, sold, or exposed or kept for sale for human consumption.

NORWICH CORPORATION ACT, 1933 (Section 67).

(Registration of ice-cream and preserved meat manufacturers and premises.)

Instructions with regard to the lighting, ventilation and cleanliness of the premises, the provision of washing accommodation, the cleanliness of the utensils and persons employed in these trades have been issued to every applicant for registration. The making or storage of ice-cream in a common courtyard is prohibited.

The undermentioned applications for registration have been dealt with :—

	On Register Dec., 1937.	Granted 1938.	Total.	With-drawn. 1938.	Remain-ing on register.
Ice-cream ...	209	49	258	8	250
Preserved meat	192	33	225	4	221

Registration was not granted until the necessary alterations had been made to make the premises comply with the requirements of the Health Committee.

379 and 2076 visits were made to ice-cream and preserved meat premises respectively.

THE PUBLIC HEALTH (PRESERVATIVES, ETC., IN FOOD) REGULATIONS, 1925-1927.

Most of the samples taken were also submitted for analysis under these regulations during the year, and none was found to contain preservative in excess.

(*d*) Chemical and Bacteriological Examination of Food.

The Chemical examination of food is carried out by the City Analyst (see pages 68-71). The Methylene Blue and Coliform tests and the bacterial counts and Phosphatase tests, were carried out by the City Analyst and Dr. G. P. C. Claridge (Pathologist), and the testing of milk for Tubercle Bacilli has been done by the Lister Institute, London, and the Field Laboratories, University of Cambridge. Water is analysed chemically and bacteriologically by the City Analyst. Laboratory arrangements are referred to on page 21.

(*e*) Nutrition.

No special arrangements for the dissemination of knowledge on nutrition have been made. Advice is given to parents when they attend at the school clinics, school medical inspections and infant welfare centres and to mothers attending the ante-natal clinics. "Health Suggestions for Teachers", which includes instructions on the question of diet, are issued to the schools.

(*f*) Shell-fish (Molluscan).

There are no shell-fish layings in Norwich; therefore, the Public Health (Shell-fish) Regulations, 1934, or the Public Health (Cleansing of Shell-fish) Act, 1932, do not apply.

Article.	Samples taken.		Samples unadulterated.		Samples adulterated.	
	Formal.	Informal.	Formal.	Informal.	Formal.	Informal.
Advocaat	—	1	—	1	—	—
Ale	2	—	2	—	—	—
Almonds (Ground)	—	1	—	1	—	—
Apricots (Dried)	—	1	—	1	—	—
Arrowroot	1	—	1	—	—	—
Beef Patty	1	—	1	—	—	—
Blackberries (Tinned)	—	1	—	1	—	—
Brandy	1	—	1	—	—	—
Brawn	2	—	2	—	—	—
Bread	—	8	—	8	—	—
Bun Flour	—	1	—	1	—	—
Butter	4	9	2	8	2	1
Camphorated Oil	—	1	—	1	—	—
Cheese (Cambridge)	1	—	1	—	—	—
Cheese (Milk and Cream)...	—	1	—	—	—	1
Cheese (Red)	—	1	—	1	—	—
Chocolate Cake	1	—	1	—	—	—
Chocolate Roll	1	—	1	—	—	—
Cinnamon (Ground)	—	1	—	1	—	—
Clove Cordial	1	1	1	1	—	—
Clarette and Lemon	—	1	—	1	—	—
Cod Liver Oil and Malt	—	1	—	1	—	—
Corned Beef	1	—	1	—	—	—
Crab (Tinned)	—	2	—	2	—	—
Cream	2	3	2	3	—	—
Carried forward	18	34	16	32	2	2

Article.	Samples taken.		Samples unadulterated.		Samples adulterated.	
	Formal.	Informal.	Formal.	Informal.	Formal.	Informal.
Brought forward	18	34	16	32	2	2
Currants	1	—	1	—	—	—
Dari (Rich)	—	1	—	1	—	—
Dripping	—	1	—	1	—	—
Egg Flipp	—	1	—	1	—	—
Egg Substitute	—	1	—	1	—	—
Elderberry Fruit Wine	1	—	1	—	—	—
Faggots	1	—	1	—	—	—
Gin	1	—	1	—	—	—
Ginger Beer	1	—	1	—	—	—
Glycerine	—	2	—	2	—	—
Grape Fruit Squash	1	—	1	—	—	—
Herring (Tinned)	—	1	—	1	—	—
Hop Beverage	—	1	—	1	—	—
Ice Cream	—	7	—	7	—	—
Iodine Ointment	1	1	—	—	1	1
Iodine (Tincture of)	—	2	—	2	—	—
Jelly	—	1	—	1	—	—
Lard	—	2	—	2	—	—
Lemonade Powder	1	—	1	—	—	—
Lemon Orange Cordial	1	—	1	—	—	—
Lemon Squash Cordial	2	—	2	—	—	—
Lime Fruit and Soda	—	1	—	1	—	—
Liver Sausage	—	1	—	1	—	—
Lobster (Tinned)	—	1	—	1	—	—
Luncheon Sausage	—	3	—	3	—	—
Carried forward	29	61	26	58	3	3

CHEMICAL EXAMINATION OF FOOD —*continued.*

Article.	Samples taken.		Samples unadulterated.		Samples adulterated.	
	Formal.	Informal.	Formal.	Informal.	Formal.	Informal.
Brought forward	29	61	26	58	3	3
Margarine	1	—	1	—	—	—
Marmalade	—	1	—	1	—	—
Milk	271	—	209	—	62	—
Milk (Condensed)	—	3	—	3	—	—
Milk (Dried)	—	2	—	2	—	—
Mincemeat	—	1	—	1	—	—
Nitre (Sweet Spirit of)	—	1	—	1	—	—
Orange Juice	—	1	—	1	—	—
Orange Squash	2	—	2	—	—	—
Ovaltine	—	1	—	1	—	—
Paste (Turkey and Tongue)	—	2	—	2	—	—
Peas (Tinned)	—	3	—	3	—	—
Peel (Candied)	—	1	—	1	—	—
Pickles	1	—	1	—	—	—
Pork Pie	—	1	—	1	—	—
Potted Meat	1	—	1	—	—	—
Prawns (Tinned)	—	1	—	1	—	—
Rum	1	—	1	—	—	—
Salts (Epsom)	—	1	—	1	—	—
Sardines	—	1	—	1	—	—
Sarsaparilla	—	1	—	1	—	—
Sausages	3	5	3	5	—	—
Soda (Bicarbonate of)	—	1	—	1	—	—
Spices (Mixed)	—	1	—	1	—	—
Suet	—	1	—	1	—	—
Carried forward	309	90	244	87	65	3

Article.	Samples taken.		Samples unadulterated.		Samples adulterated.	
	Formal.	Informal.	Formal.	Informal.	Formal.	Informal.
Brought forward	309	90	244	87	65	3
Sulphur (Milk of)	—	1	—	1	—	—
Sweets	1	4	1	4	—	—
Tartar (Cream of)	—	1	—	1	—	—
Tea	—	1	—	1	—	—
Vinegar (Malt)	2	2	2	2	—	—
Vitacup	—	1	—	1	—	—
Whisky	2	—	2	—	—	—
Totals	314	100	249	97	65	3

MIDWIFERY, MATERNITY AND CHILD WELFARE SERVICES

MIDWIFERY, MATERNITY AND CHILD WELFARE SERVICES.

(*a*) Midwives.

(i.) *Employed by Local Authority.* 15 midwives are employed on the district, and a Matron, Sister, and three Midwives in the wards at the Maternity Home.

(ii.) *Private Midwives.* 17 midwives were practising privately in the City at the end of the year—10 in Institutions and 7 on the district. This number includes 4 midwives who reside outside the area, but who occasionally practise within the area.

(*b*) Midwifery Service

(i.) *Domiciliary.* The domiciliary midwifery service is controlled from the Maternity Home where an office has been established with a clerk in attendance. Each midwife is provided with a telephone. 830 confinements, excluding 14 cases of miscarriage, were attended on the district by the Council's domiciliary midwives. Doctors had been engaged in 178 of these cases. In addition to attending these 830 labours, the domiciliary midwives carried out ante-natal supervision, making a total of 4249 ante-natal visits to patients' own homes. The nursing visits after labour numbered 14,712. In addition, the midwives attended for varying periods 30 patients who had been discharged from the Norfolk & Norwich Hospital and paid 177 visits to patients who had been discharged from the Maternity Home before the expiration of the lying-in period, i.e., 14 days. The district midwives are required to assist at regular intervals at the Ante-Natal Clinics which are held at the Maternity Home, and those midwives who are practising in the Catton and Mile Cross districts attend at the Ante-Natal and Post-Natal Clinics which are held at Catton Grove Infants' School.

There were 21 stillbirths (including two twin children) on the district representing 2.5% of the cases attended. It is noteworthy that 575 or 88% of the midwives cases (excluding cases where a doctor was engaged) were seen ante-natally at least once by a medical practitioner. This compares with 84% during the first six months of the domiciliary service, and is a good response to the recommendation of the Central Midwives Board regarding ante-natal care. Now that the domiciliary midwives reside in the district in which they practice it is noteworthy that the number of babies born before the midwife has arrived at the house (the B.B.A. rate) has decreased. In 1938 the rate for all cases (doctors and midwives) was 8%. The figures for the year

1937 are not available for all midwives but the B.B.A. rate for the two midwives resident at the Maternity Home and attending cases anywhere in the City was 12%.

One case of Puerperal Fever which occurred on the district was removed to the Norfolk and Norwich Hospital and died. There were 6 cases of Puerperal Pyrexia. 2 cases were removed to the Isolation Hospital, 1 of whom died, the cause of death being Puerperal Sepsis and Phlebitis. The final diagnoses in the cases who recovered were, Sapræmia 2; Influenza 1; Acute Pyelitis before labour continuing after labour 1; no definite diagnosis 1.

(ii.) *The City of Norwich Maternity Home,* from which district cases are also attended, has 15 beds, an isolation bed and two labour wards, a babies' nursery with a balcony, and a babies' bathroom. The administrative supervision of the home and district is carried out by one of the Assistant Medical Officers of the Public Health Department. A consultant surgeon and a consultant obstetrician can be called in for cases of difficult labour, etc. The permanent staff consists of a Matron, Sister, and three midwives, and the maximum number of pupils to receive training at any one time is 5. The Home has been approved under the new Section B of the Rules of the Central Midwives Board in respect of the second period of training of 5 or 6 pupils, the pupils to be obtained from the General Lying-in Hospital, York Road, Lambeth. At the end of the year 4 pupils were undergoing training in midwifery.

8 pupils who received training at the Home passed the examination of the Central Midwives Board in 1938. During the year 348 women were confined in the Home, doctors having been engaged in 21 cases.

In accordance with the instructions of the Committee, 7 booked cases were transferred to private nursing homes owing to all the beds in the Home being occupied at that time. Further cases applied for admission but had to be refused owing to lack of accommodation. 7 stillbirths occurred in the Home and 2 children died within 10 days of birth. 7 cases of Puerperal Pyrexia occurred 3 of whom were transferred to the Isolation Hospital, and one to the Norfolk and Norwich Hospital; there was no death, but one patient was still in hospital at the end of the year. The final diagnoses in these cases were:—Tissue bruising and general cardiac distress 1; Puerperal Septicæmia with bilateral femoral thrombosis 1; Pyelitis and coryza 1; Anæmia 1; Cystitis due to staphylococci 1; local sepsis-vagina 1; local sepsis of perineal tear 1.

Ante-Natal Clinics are held at the Maternity Home and are referred to below.

The growth of the work at the Maternity Home is illustrated by the following figures, which show the number of cases dealt with :—

	1931.	1932.	1933.	1934.	1935.	1936.	1937.	1938.
In the Home ...	302	330	319	350	360	345	341	348
On the District ...	269	231	276	298	229	260	572	830
Totals ...	571	561	595	648	589	605	913	1178

345 live births (including 4 sets of twins) occurred in the Home and 818 (including 8 sets of twins) on the district, a total of 1163 or 72.8% of the City live births registered. With the 91 live births (including 1 set of twins) at the Infirmary added to this, the Council's staff attended to 78.5% of the total City live births registered.

(iii.) *Public Assistance Institution.* At the Public Assistance Institution 5 beds are provided for maternity cases. 93 cases were admitted during the year and the average duration of stay was 27.9 days. There were 3 stillbirths.

7 children died within 10 days of birth, 1 of whom was not born in the Institution. One case of Puerperal Pyrexia was notified, the final diagnosis being Pyelitis.

(*c*) **Ante-Natal Clinics** with a Medical Officer in attendance are held at the Maternity Home on Monday mornings, and Monday, Tuesday, Wednesday and Friday afternoons. The combined Ante-Natal and Post-Natal Clinic at Catton Grove Infants' School was opened in November and a session has been held weekly on Friday afternoons. The session which is held at the Maternity Home on Wednesday afternoons is chiefly reserved for new district cases and as far as possible the domiciliary midwife who is to attend the case is present. During the year 952 expectant mothers attended the Ante-Natal Clinics at the Maternity Home and 33 expectant mothers attended the Clinic at Catton Grove Infants' School, a total of 985 representing 59.4% of the total number of registered City births including stillbirths. These expectant mothers made 3379 attendances at the Maternity Home Clinics and 46 at Catton Grove Infants' School, the average attendances per session being 14 and 5 respectively. In 1937, 1080 mothers attended the Clinics at the Maternity Home making 3949 attendances, the average attendance per session being 17. The importance of women attending an Ante-Natal Clinic is constantly being impressed on the midwives

practising in the City. The fact that approximately only 59.4% of the women confined in the City attended the Council's Ante-Natal Clinics seems to indicate that many women are still apathetic towards this matter but now that more confinements are being attended by the Council's midwives it is hoped that the number of women availing themselves of these facilities will increase. Further, with a view to enabling women easily to seek the advice of a doctor, the Council has decided to provide accommodation in various parts of the City to serve the purpose of Ante-Natal, Post-Natal and Infant Welfare Clinics. As has been stated, the first of the area Ante-Natal and Post-Natal Clinics was opened at Catton Grove Infants' School in November and it is hoped that further clinics will be opened in the spring of 1939 at Lakenham and Earlham. 8 cases were referred to the Ante-Natal Clinic by general practitioners in the City.

The following table shows the results of the examinations of blood specimens which have been sent through the Ante-Natal Clinics to the Norfolk and Norwich Hospital for Wassermann tests:—

Year.	Positive.	Doubtful.	Negative.	Total.
1930	5	—	13	18
1931	3	—	13	16
1932	6	4	23	33
1933	5	3	18	26
1934	5	5	22	32
1935	8	1	52	61
1936	11	4	78	93
1937	23	12	287	322
1938	20	11	214	245

Smears for examination for gonococcal infection are examined in the Ante-Natal Department.

Of the 20 mothers who gave positive results 17 received treatment. Of the mothers who received treatment, 13 each gave birth to a living child; in one of these cases the mother had Pyrexia with severe septic sores of buttocks and thighs. In another case the infant had jaundice which reacted to treatment. A satisfactory recovery was recorded in each case. The remaining 4 mothers had not been confined at the end of the year. Of the 3 mothers who did not receive any treatment, 1 had a premature labour with toxæmia but gave birth to a living child; 1 had a normal labour and gave birth to a living child. The

remaining case was not suffering from syphilis and did not require any treatment. There is nothing noteworthy to record in the cases in which doubtful results were returned.

(*d*) **A Post-Natal Clinic** is held at the Maternity Home weekly and another has been held weekly at Catton Grove Infants' School jointly with an Ante-Natal Clinic since November. During the year 222 mothers attended the clinics at the Maternity Home, making 300 attendances and 1 attended the clinic at Catton Grove Infants' School. Ante-Natal and Post-Natal Clinics are also held at the Norfolk and Norwich Hospital weekly at which City and County persons booked for admission to or discharged from the Maternity Ward of that Institution attend. The Secretary of the Hospital states that 279 women made 685 attendances at the clinic during the year but he was unable to give separately the numbers in respect of City and County persons.

(*e*) **Infant Welfare Centres.** Following on the demolition of St. Catherines Church in March, the Infant Welfare Centre held at those premises was transferred to the Mile Cross Methodist Church Room. No additional centre was opened during the year, but for the convenience of the mothers living on the Catton Grove Estate one of the sessions held at the Mile Cross Methodist Church Room was transferred to Catton Grove Infants' School in September. Owing to the large number of mothers attending the centre at St. Barnabas Parish Hall an additional session each week was arranged from October. Further, for the convenience of the mothers living on the Mousehold Estate arrangements were being made in December to transfer to George White School the centre held at Catton Christchurch Room. It is hoped that new centres will be opened at Lakenham and Earlham in the spring of 1939 for the convenience of mothers living on those Estates.

The average attendance of children per session at all the centres was 64.7, compared with 67 for the previous year. 11,257 attendances were made by children under 1 year; 6549 by children between 1 and 2 years; and 15,730 by children between 2 and 5 years—a total of 33,536. 1291 children were brought to the centres for the first time during the year, 1050 being under 1 year of age. Children were seen by the Medical Officers in charge on 27,072 occasions, an average of 52 per session. 4513 children attended the centres during the year, their ages at the end of the year being:—under 1 year of age, 915; between the ages of 1 and 5 years, 3598.

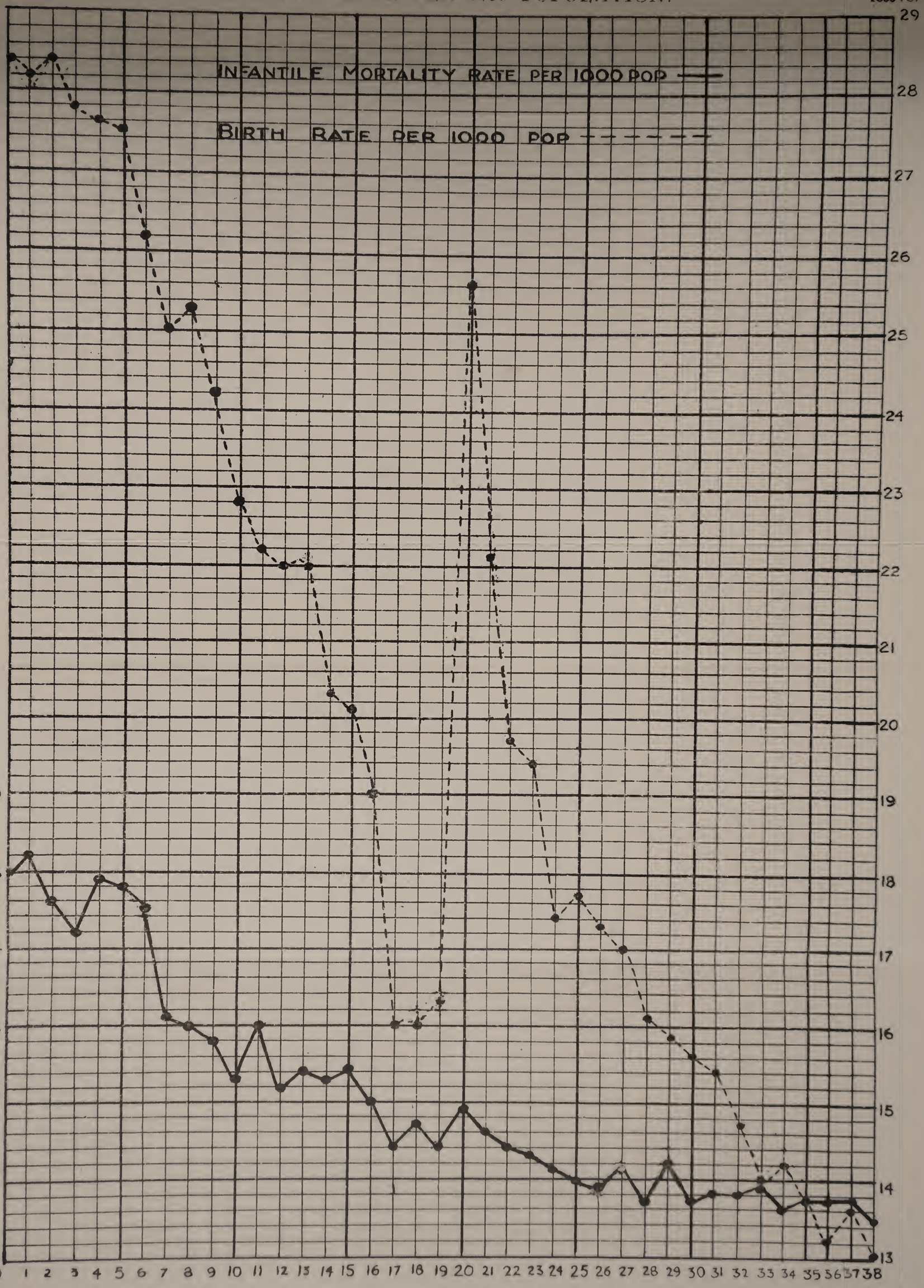
The table shows the attendances, etc., at the individual Infant Welfare Centres.

INFANT WELFARE CENTRES.

Name of Centre.	When Held.	No. of Sessions.	No. of New Cases Attended.	Total No. of Cases Attended.	Total Attendants seen by Medical Officers.		No. of Attendances.		Average Attendances per Case.
					Total.	Average per Session.	Total.	Average per Session.	
Martineau Hall, Colegate.	Tuesday p.m.	51	83	232	1867	35	2011	39	8.7
The Salvation Army Hall, Southwell Road. (2 Medical Officers until 15th Aug.)	Monday p.m.	48	152	588	3503	73	4461	93	7.6
St. Barnabas' Parish Hall, Russell Street.	Tuesday a.m.	51	185	557	3069	62	4235	83	7.6
	Wednesday p.m. (from 26th Oct.)	10	12	638	284	28	352	35	6.3
	Friday p.m.	51	115		3169	62	3663	72	
St. Julian's Parish Hall, Thorn Lane.	Wednesday a.m.	52	86	267	1835	35	2257	43	8.5
Thorpe Hamlet.	Wednesday p.m.	52	121	410	2382	46	3166	61	7.7
Catton Church Room, Magdalen Road.	Thursday a.m.	52	182	568	3392	65	4337	83	7.6
Eaton Parish Room, Colman Road.	Thursday p.m.	52	128	381	2534	49	3144	60	8.3
St. Catherine's Parish Hall, Aylsham Road. (and from 4th Mar. until 26th Aug.)	Monday a.m.	48	95	458	2318	48	2796	58	6.1
Mile Cross Methodist Church Room.	Friday a.m.	33	90	414	1987	60	2233	68	7.5
Catton Grove Infants' School. (From 2nd Sept.)	Friday a.m.	18	42		732	41	881	49	

CHART No. 2.

INFANTILE MORTALITY RATE PER 1000 POPULATION AND BIRTH RATE PER 1000 POPULATION.

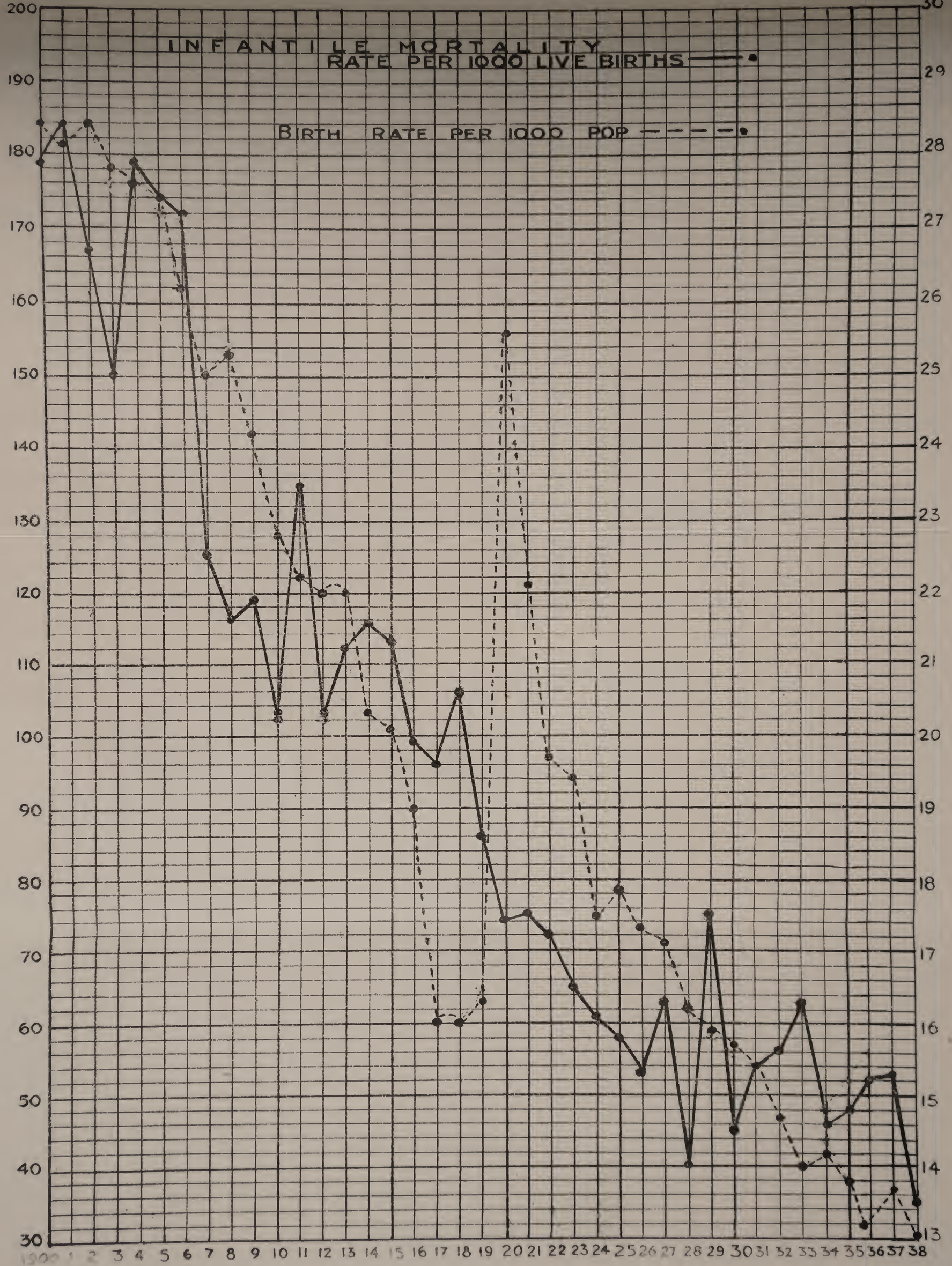


INFANTILE MORTALITY RATE PER 1000 LIVE BIRTHS.

CHART No. 1.

INFANTILE MORTALITY, 1900-38

BIRTH RATE PER 1000 POP



The Infantile Mortality Rate (35.04) has had a very satisfactory drop (see page 14). This is in spite of the presence of both measles and whooping cough, and indeed there was 1 death from measles and 3 from whooping cough under one. The neo-natal mortality has fallen slightly, but not in the same proportion as the mortality rate after the first 4 weeks of life. For the last few years the deaths under 4 weeks have fluctuated in the neighbourhood of 52 per cent. of those under one year, sometimes being slightly higher, but this year the deaths under 4 weeks have been 64.29 per cent. of the total infantile mortality. There were 36 deaths under 4 weeks and of these 30 are under one week and that is well over 50 per cent. of the whole year's infant deaths. The big bulk of the deaths are in the premature birth, congenital defects, etc., group. Those items account for 29 deaths and, if the 1 death under 1 week due to debility and the 2 deaths due to injury at birth are added, 32 of the 36 deaths under 4 weeks come within the category and period of life which can only be affected by ante-natal work. It is hoped that the spreading of ante-natal clinics about the City will have some effect on this in due course, but it remains to be seen whether this hope materialises in actual fact. The great saving in 1938 has been in the bronchitis-pneumonia group, i.e., respiratory catarrh group; this is possibly due to the decrease of overcrowding through the housing activities, possibly the improving outlook of our people towards open air and sun and the more sensible clothing of our women, and another factor may be our constant struggle to increase the proportion of breast-fed babies which should give these babies a greater resistance to the respiratory organisms to which the mother has become accustomed. It is in the particular direction of infantile mortality due to infectious diseases and respiratory catarrh that one looks with some anxiety to the effect of the recent introduction of nursery schools and classes, although this effect may be masked by the decreasing birth rate and the various health factors mentioned above.

ISSUE OF FRESH MILK AND DRIED FOODS TO MOTHERS AND CHILDREN.

Accredited Milk has been supplied to expectant mothers at any time during ascertained pregnancy.

During the year, 549,686 pints of milk were distributed—468,274 pints to children under 5 years (432 new cases), 31,540 to expectant mothers (333 new cases), and 49,872 to nursing mothers (155 new cases).

The monthly issue of milk during the last 7 years is of interest:—

	1932	1933	1934	1935	1936	1937	1938
Jan.	21,522	33,150	39,329	42,477	47,463	46,098	47,381
Feb.	19,184	31,735	37,866	39,651	46,552	41,120	43,626
March	20,727	37,579	41,017	44,472	46,174	43,899	46,938
April	22,393	35,824	40,658	37,480	46,299	43,226	43,265
May	21,589	34,700	38,971	41,860	46,734	44,404	45,152
June	23,972	33,960	40,782	41,689	39,323	42,968	44,435
July and Aug.	50,224	71,721	78,298	81,119	88,607	87,363	90,246
Sept.	26,121	36,159	40,277	40,874	41,194	43,074	44,476
Oct.	27,984	34,981	38,654	43,484	44,934	45,105	46,391
Nov.	29,691	38,356	39,383	43,422	43,041	43,848	48,152
Dec.	32,297	38,086	41,382	42,695	46,622	46,829	49,624
	295,704	426,251	476,617	499,223	536,943	527,934	549,686

Dried foods are also issued, the following table showing the distribution during the last 7 years:—

	Packets given free.	Packets sold at "Cost."	Packets sold at ½ "Cost."	Total.
1932	1,948	516	98	2,56-
1933	1,519	314	50	1,883
1934	1,647	566	85	2,298
1935	1,523	305	6	1,834
1936	1,741	585	47	2,373
1937	1,559	1,595	108	3,262
1938	2,072	1,543	81	3,696

The following figures show the quantities of fresh milk and dried food which have been issued *free of cost* to mothers and children during the last 7 years. In comparing the figures, it is well to bear in mind that one packet of dried food corresponds to approximately $5\frac{3}{4}$ pints of milk.

	Fresh Milk (Pints).			Dried Food.
	Mothers.	Children.	Total.	
1932 ...	77,500	218,204	295,704	1,948 packets
1933 ...	90,221	336,030	426,251	1,519 ,,
1934 ...	89,641	386,976	476,617	1,647 ,,
1935 ...	79,664	419,559	499,223	1,523 ,,
1936 ...	84,889	452,054	536,943	1,741 ,,
1937 ...	84,742	443,192	527,934	1,559 ,,
1938 ...	81,412	468,274	549,686	2,072 ,,

In addition to the above, the undermentioned foods were distributed from the Infant Welfare Centres on the recommendation of the Medical Officers:—

	Free.	Half Cost.	Full Cost.	Total.
Virol (1-lb. jars) ...	7,565	338	550	8,453
Malt and Oil (1-lb. jars)	10,843	182	1,192	12,217
Lactagol (tins) ...	2,019	248	130	2,397
Virolax (7-oz. tins) ...	426	19	61	506

The Maternity and Child Welfare Committee had under consideration the question of supplying meals to mothers, and decided, as an experiment for three months, to supply dinners to expectant and nursing mothers in certain areas by collaboration with the Education Committee. No applications were received for the supply of meals, and the Committee decided to take no further action.

Dental Treatment, etc.

Nursing and expectant mothers and children under 5 years of age deemed by the Medical Officers of the Clinics to need dental treatment, and Tuberculosis patients, are supposed to be treated at the School Dental Clinic at Churchman House on Saturday mornings, but the numbers requiring treatment have so increased that it has not been possible for the Dental Officers to cope with them in one session. The table on pages 162-163 shows the work which has been done in this direction during the last 9 years.

In 72 of the cases in which dental mechanical work was provided, the Committee felt justified in asking the mothers to contribute towards the cost.

Children seen at the Infant Welfare Clinics suspected to be suffering from defective vision are referred to the School Eye Clinics at Churchman House. During the year, 45 cases were referred; glasses were recommended for 22 children, and these were obtained through the contractors to the Education Authority. In 19 cases the Committee considered that the parents were able to pay for the glasses.

Children under school age suffering from ringworm of the scalp are treated at the Ringworm Clinic at Churchman House, where X-ray treatment of this disease is carried out by Dr. Levack, D.M.R.E., assisted by one of the School Nurses. Children under 5 years of age with ringworm are rarely treated by X-rays, as they will not keep still. No child was treated during 1938.

Some children under school age have attended at the Minor Ailments Clinics which are held at Churchman House. 80 of these children were brought to the Clinics, of whom 23 were found to have defects which required treatment.

Mr. N. S. Carruthers, F.R.C.S. (Ed.), or Mr. R. A. Highmoor, F.R.C.S. (Ed.), have examined children at the office of the Public Health Department, and on their recommendations the treatment of discharging ears in children is carried out, the Maternity and Child Welfare Committee co-operating with the Education Committee. The treatment of school children is carried out daily in the schools by one of the Council's Health Visitors (Saturdays and Sundays excepted), but the treatment of all known cases of children under 5 years of age with discharging ears is carried out at their homes by Cavell Nurses.

During the year, 16 children under school age (11 new cases) were examined by the Specialists, of whom 8 cases (7 new cases) received treatment.

Surgical appliances are provided for children under 5 years of age who attend no school, the cost being borne, wholly or in part, by the Council, where the financial circumstances justify such a course. 92 children were either supplied with surgical appliances or had their shoes wedged. Parents were asked to contribute towards the cost in 69 cases.

INSTITUTIONAL PROVISION FOR MOTHERS OR CHILDREN.

In addition to the mothers' accommodation at the Maternity Home (see page 75), mothers and children are accommodated at the Public Assistance Institution and children at the Children's Homes.

HEALTH VISITORS.

The Health Visitors, who also act as School Nurses, carry out routine visiting of infants unless there is reason to think this procedure is not required. The newly-born are visited as soon as possible after the doctor or midwife leaves, and then at fairly frequent intervals until the child attains the age of 5 years, advice being given to the mothers and efforts being made to persuade them to attend the appropriate Infant Welfare Centre. Some parents send their children to school before they become five; in these cases the supervision of the child is controlled by the machinery of the School Medical Service.

During the year the Health Visitors paid 505 visits to expectant mothers, 7355 visits to children under 1 year—1318 of these being first visits, and 9131 to children between 1 and 5 years of age. The total number of visits paid by the Inspector of Midwives, Tuberculosis Visitor, and Health Visitors and School Nurses during the year was 21,674.

CHILD LIFE PROTECTION.

The duties of the Local Authority with regard to Child Life Protection are discharged by the Maternity and Child Welfare Committee.

The age under which the reception of children for reward must be notified to the Local Authority is 9 years. 11 new persons were registered for the reception of children, the total number of registered persons at the end of the year being 67, with 30 of whom children were boarded out.

15 new children were boarded out during the year. 1 was adopted, 7 went to live with their parents or relatives, 4 removed to other areas (the Authorities being notified), 3 were transferred to the care of Societies or admitted to Institutions and 4 ceased to come under the provisions of the Act by attaining the age of 9 years. The total number of children under supervision at the end of the year was 33.

The Child Life Protection Visitor paid 285 visits for the purpose of inspecting homes and children, and conducted 26 special investigations, i.e., *re* maintenance, cases of neglect, etc.

STILL-BIRTHS.

For the purpose of the Births and Deaths Registration Act, 1926, the definition of still-birth is as follows:—

> " 'Still-born' and 'still-birth' shall apply to any child which has issued forth from its mother after the twenty-eighth week of pregnancy and which did not at any time after being completely expelled from its mother, breathe or show any other signs of life."

The following table shows the number of still-births, legitimate and illegitimate, registered in the City, and the numbers occurring in cases attended at or from the Maternity Home:—

Year.	No. of still-births registered.	% of total City births registered.	Legitimate still-births.	% of total City legitimate births.	Illegitimate still-births.	% of total City illegitimate births.	Cases attended at or from the Maternity Home. No. of confinements attended.	No. of still-births.	% of total confinements attended.
1929	98	4·7	91	4·59	7	6·60	515	20	3·9
1930	83	4·04	79	4·06	4	3·64	553	9	1·6
1931	100	4·86	96	4·90	4	3·96	571	21	3·7
1932	65	3·36	61	3·33	4	4·00	561	15	2·6
1933	58	3·18	54	3·11	4	4·65	595	15	2·5
1934	58	3·14	53	3·0	5	6·41	648	18	2·8
1935	52	2·93	47	2·8	5	5·21	589	15	2·55
1936	58	3·42	53	3·32	5	5·15	605	12	1·98
1937	55	3·18	50	3·04	5	5·68	913	29	3·18
1938	60	3·62	56	3·56	4	4·60	1178	28	2·38

In connection with the above, it is well to remember that the mothers attending the Municipal Home are, as a rule, not particularly well off, but can nearly always pay the required fee, and, on the other hand, that those cases recognised to be so abnormal as to require considerable interference are referred to the private doctor or hospital.

There were 3 still-births at the Infirmary, representing 3.19 per cent. of the total births in this Institution. The majority of the cases admitted were either abnormal or persons in very poor circumstances.

The following table shows the yearly total number of still-births and infant deaths (a) under 1 month, (*b*) under 1 year, registered in the City during the last 10 years :—

Year.	No. of still-births registered.	(*a*) No. of deaths under 1 month registered.	Total.	% of live births less neo-natal deaths.	No. of still-births registered.	(*b*) No. of deaths under 1 year registered.	Total.	% of Total City births registered.
1929	98	60	158	8·2	98	149	247	11·8
1930	83	44	127	6·6	83	88	171	8·3
1931	100	65	165	8·7	100	107	207	10·0
1932	65	54	119	6·6	65	105	170	8·8
1933	58	50	108	6·3	58	111	169	9·3
1934	58	49	107	6·2	58	82	140	7·6
1935	52	45	97	5·8	52	83	135	7·6
1936	58	48	106	6·7	58	85	143	8·4
1937	55	44	99	6·1	55	88	143	8·3
1938	60	36	96	6·1	60	56	116	7·0

The following table shows the quarterly registration of still-births during the past 7 years :—

Year.	March Quarter.	June Quarter.	September Quarter.	December Quarter.	Total.
1932 ...	12	17	16	20	65
1933 ...	13	16	15	14	58
1934 ...	23	9	11	15	58
1935 ...	13	18	13	8	52
1936 ...	19	15	9	13	58*
1937 ...	16	13	12	14	55
1938 ...	21	11	11	14	60†
Totals—					
Quarterly	117	99	87	98	
Half-yearly	216		185		

*Includes 2 still-births which occurred outside the City but were transferred to the City—actual dates not available.

†The returns received from the local Registrar of Births and Deaths show that only 57 stillbirths occurred in the City. The Registrar-General has allocated 60 stillbirths to Norwich—presumably 3 occurred outside the City but the parents were ordinarily resident in Norwich. The actual dates of these stillbirths are not available.

The still-births registered during 1938 were distributed amongst the Wards of the City as follows :—

Ward.	No. of Still-births.	Ward.	No. of Still-births.
Earlham	8	Eaton	3
Heigham	2	Town Close ...	3
Hellesdon	5	Lakenham ...	3
Catton	9	Nelson	—
Mousehold ...	3	St. Stephen ...	3
Westwick	5	Conesford	1
Coslany	3	Ber Street	2
Fye Bridge ...	4	Information not available ...	3
Thorpe	3		—
			60

Owing to the extensive movement of the City population, resulting from the Corporation's housing activities, the different Wards are not, at present, comparable from year to year.

The following table shows the conditions associated with the still-births which were registered during 1936, 1937, *and* 1938 :—

	1936.	1937.	1938.
Albuminuria	4	—	—
Anencephaly	1	1	3
Anencephaly—Maternal Subnutrition ...	—	1	—
Accidental Shock	2	—	—
Ante-Partum Hæmorrhage	1	—	1
Asphyxia—cord round neck	1	—	—
Attempted Version? Separation of Placenta	—	1	—
Atelectasis	1	—	—
Breech Presentation	2	—	3
Breech—difficult delivery	—	2	—
Breech—Primipara	—	1	—
Breech—Obstructed Labour	—	1	—
Breech—Probably Syphilis	—	1	—
Breech? Pressure on Cord	—	1	—
Breech with extended arms and legs ...	1	—	1
Breech, with difficult labour	—	—	1
Cord round neck	—	—	3
Contracted Pelvis—Cord round neck ...	—	1	—
Contracted Pelvis—Intracranial Hæmorrhage	—	1	—
Cerebral Hæmorrhage	1	—	—
Congenital Malformation	—	1	—
Congenital Malformation—Maternal Syphilis	—	1	—
Disproportion in size of Pelvis and Fœtus...	3	—	—
Delayed Labour	2	—	—
Difficult Labour—Face Presentation ...	—	—	1
Eclampsia	2	1	2
Hydramnios	—	—	2
Hydramnios—Extended Breech	—	1	—
Hydrocephalus...	3	1	3
Hæmorrhage and Placenta Prævia, Placenta Prævia	5	1	—
Impacted Shoulders	—	—	1
Intracranial Hæmorrhage	—	1	—
Impacted Breech with Extended Arms and Legs	—	—	1
Macerated	—	—	8
Macerated—Positive Wassermann ...	—	—	2
Malpresentation—Prolapse of Cord ...	—	3	—
Malpresentation—Instrumental Delivery ...	—	1	—
Malpresentation	3	—	—
Maternal Anæmia	1	—	1

	1936.	1937.	1938.
Maternal Anæmia—Prematurity ...	—	1	—
Maternal Anæmia and Ante-Partum Hæmorrhage	1	—	—
Maternal Anæmia and Fœtal Congenital Deformities	1	—	—
Maternal Albuminuria—Prematurity ...	—	1	—
Maternal Hyperpiesis and Hemiplegia ...	—	—	1
Maternal Ill-health—Dental Sepsis—Malnutrition, etc.	—	1	—
Maternal Ill-health—Rheumatism and enlarged Thyroid	—	1	—
Maternal Malnutrition and Toxæmia ...	1	—	—
Maternal Influenza	—	1	—
Maternal Syphilis	1	—	—
Maternal Toxæmia	—	4	1
Maternal Toxæmia—Craniotomy ...	—	1	—
Maternal Toxæmia—Prolonged labour ...	—	1	—
Maternal Toxæmia—Induction	—	1	—
Maternal Toxæmia and Malpresentation ...	1	—	—
Maternal Toxæmia and Ante-Partum Hæmorrhage	1	—	—
Maternal Endocrine Disturbance... ...	1	—	—
Maternal Urinary Infection and Pylephlebitis	1	—	—
Prolapse of Cord	—	1	1
Prolapse of Cord—Instrumental Delivery	—	1	—
Pyelitis of Pregnancy	1	—	—
Pyelitis of Pregnancy and Maternal Cardiac Disease	—	—	1
Prematurity and inattention at birth ...	2	—	—
Prematurity—Breech Delivery with Extended Legs	—	—	1
Prematurity	1	—	1
Precipitate labour and inattention ...	1	—	—
Precipitate Labour	—	1	—
Primary Uterine Inertia...	1	—	—
Prolonged Labour—Forceps Delivery ...	—	—	1
Placenta Prævia	—	1	2
Placenta Prævia—Manipulations ...	—	2	—
Post-Maturity—Maceration	—	—	1
Post-Influenzal Maternal Toxæmia—Induction Difficult forceps delivery ...	—	1	—
Premature Rupture of Membranes ...	—	—	1
Relative Hydramnios—Prolapsed cord ...	—	1	—

	1936.	1937.	1938.
Strangulation of Cord—Faulty amniotic development (twin)	—	1	—
Toxic Accidental Hæmorrhage	—	—	1
Toxæmia of Pregnancy	3	—	1
Unknown, or information not obtainable ...	8	12	14
Totals ...	58	55	60

MATERNAL MORTALITY.

There were 5 maternal deaths during the year—2 from sepsis and 3 from other puerperal causes, producing a maternal death rate of 3.13 per thousand live births, which is an increase compared with the rate for 1937. The following are the rates per thousand live births for the previous 5 years :— .

1933.	1934.	1935.	1936.	1937.
3.40	6.15	2.32	4.89	2.98

The investigations for the Ministry of Health into maternal deaths have continued and the medical profession have kindly given me every assistance in their power. An Obstetrical Specialist has not been engaged for this purpose, the investigations being conducted by the Medical Officer of Health. Midwives have been urged to encourage their patients to see a doctor, ante-natally; in the case of women who are insured persons, by the Insurance practitioner; or, in the case of uninsured persons, by their own doctor or by the Medical Officer at the Ante-Natal Clinic. Arrangements have been made for a second opinion to be given in cases of Puerperal Fever and Puerperal Pyrexia, when required by private practitioners. If necessary, cases of Puerperal Fever and Puerperal Pyrexia are removed to the Isolation Hospital. The examination of pathological material is carried out by a private pathological specialist.

On the request of private practitioners, "Cavell" Nurses are sometimes used for the home nursing of infectious cases, the Local Authority making a grant to the Norwich District Nursing Association for the nursing of these and other cases.

Facilities for Consultations.

A panel of consultants, consisting of Mr. Bulman, Dr. Crook, Dr. Hinde and Mr. Noon, has been arranged, and general practitioners have been authorised to consult any member of this panel in difficult maternity cases if occasion arises, without getting previous authorisation. The Committee is responsible, in the first instance, for the fee, but has reserved the right to recover the fee in whole or in part from the patient.

Consultants were called in by general practitioners to 23 cases.

Of 20 cases which were considered, the Committee felt justified in asking the patients to pay the whole or part of the Consultant's fee in 9 cases; 3 cases had not been considered at the end of the year. It is of interest to note that 1 mother for whom a Consultant was called in died in 1938.

Ante-Natal Care.

The attention of midwives has been called to the importance of Ante-Natal supervision, and in connection with this a sum of 15/- is paid to a midwife if, on her own initiative, a case is transferred from her care so that she loses the fee ordinarily payable. Of 5 applications received from certified midwives, 4 were considered and granted by the Committee at the end of the year; 1 application had not been considered.

Home Helps.

The services of a Home Help in maternity cases in which a midwife is in attendance are provided, the period during which the Home Help is employed being generally limited to 14 days, but this is extended on the recommendation of a doctor, midwife, or health visitor. 7 persons were acting as Home Helps at the end of the year. Payment by the Council to the Home Help is at the rate of 5/- per day, and the patient contributes towards the cost according to her financial circumstances. Home Helps assisted in 84 cases during the year, and in all of these the Committee considered that the patients were in a position to contribute towards the cost.

ADMISSION OF ABNORMAL PATIENTS TO THE NORFOLK AND NORWICH HOSPITAL.

During the year, arrangements were made between the Council and the Board of Management of the Norfolk and Norwich Hospital for the admission to the Hospital of abnormal or suspected abnormal ante-natal or post-natal cases. The arrangements, which are provisional and subject to revision after the scheme has been in operation for 12 months, are as follows :—

(1.) The Council are responsible for payment only in respect of patients admitted :—

(*a*) Through any Municipal Institution.

(*b*) Through any Municipal Ante-natal Clinic (but only where the patient has booked for her confinement through Municipal auspices).

(*c*) On the order of the Medical Officer of Health.

(*d*) At the request of the consultants appointed by the Council who may be called in by a general practitioner in difficult maternity cases.

(2.) The Council to pay a charge of £3. 5s. 0d. per patient per week.

(3.) It is understood that :—

(*a*) If a general practitioner desires to send a patient into the Hospital he will be entitled to do so, and the patient will be admitted without financial responsibility to the Council.

(*b*) No patient over the Hospital income limit of £300 per annum will be admitted under the scheme.

The new Maternity Block was opened by her Majesty Queen Elizabeth on 29th October, 1938.

Two cases were admitted up to the end of the year, but had not been considered by the Committee with regard to payment before the end of the year.

ORTHOPÆDIC TREATMENT.

The Council's Orthopædic Scheme provides for the treatment of orthopædic defects in children and cases of tuberculosis of bones and joints. Clinics are held at the local hospitals, usually on Saturday mornings, with Mr. H. A. Brittain, F.R.C.S., in attendance, assisted by the Council's orthopædic masseuse. 111 new cases of children under 5 years of age and 95 children continuing treatment from the previous year were seen at the clinics. 10 children received institutional treatment at the Jenny Lind Hospital and 1 at Melton Lodge, Great Yarmouth. Details of the cases of children examined and treated under the Orthopædic Scheme are shown on pages 164-168.

CONTRACEPTIVE CLINIC.

Owing to the comparatively small use which was made of the Contraceptive Clinic held at the Maternity Home, the Committee decided to discontinue the clinics. Persons requiring further observation or information were referred to the Voluntary Clinic at Pitt Street. In consideration of the Voluntary Clinic accepting these cases, the Council subscribes £12 annually.

MATERNITY AND NURSING HOMES.

Before being registered, new Homes are inspected by a Medical Officer of the Public Health Department, to ensure that the arrangements comply with the Byelaws and the standards laid down by the Committee. The arrangements for protection against fire are inspected by the Police. All registered Homes are inspected periodically by a Medical Officer. No application for the registration of premises as a Nursing Home was received.

The number of registered Homes at the end of the year was 12. These are used as follows :—Maternity Homes, 2; Nursing Homes (Non-Maternity), 4; Mixed Homes, 6; 2 institutions are exempt.

OPHTHALMIA NEONATORUM.

Every effort is made to secure prompt treatment of ophthalmia neonatorum. The table below shows the number of notifications of this disease which were received :—

Notified.	Cases Treated. At Home.	Cases Treated. In Hospital.	Vision unimpaired.	Vision impaired.	Total Blindness.	Removed from District.
9	2	7	*7	—	—	—

2 cases were still under treatment at the end of the year.

*As far as can be ascertained by the Health Visitors and enquiries of the doctors in charge of the cases.

INFECTIOUS DISEASES
AND
ISOLATION HOSPITAL

PREVALENCE OF AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

Infectious Diseases were comparatively quiet during the year, with the exception of the continuance of the outbreak of dysentery of the Sonne type, which was prevalent at the latter part of 1937. The table on pages 172-173, with the comments on pages 171 and 174 show the 1938 infectious disease incidence in the schools.

Scarlet Fever with 180 cases showed a decrease as compared with 312 cases in 1937, and 212 in 1936. The disease was of a mild type, and there was no death.

Diphtheria with 169 cases showed an increase compared with 127 cases in 1937. There were 10 deaths in the City (1 a non-resident) from this disease, 8 being school children and 2 under school age. The Health and Education Committees have continued to offer free immunisation to the public, but this has received a poor response. During the year, 372 new cases (including 250 school children) were dealt with. 262 (including 150 school children) were not primarily Schick tested; 110 (including 100 school children) were so tested, 20 of whom (including 15 school children) were Schick negative. 355 cases (including 238 school children) commenced injections during the year. 348 cases had a final Schick test, 312 of whom were negative. 10 were re-tested after a further course of injections, when a further 8 were found to be Schick negative. 4 children who were proved Schick negative developed the disease; all made satisfactory recoveries. 62 City persons were admitted as diphtheria carriers to the Isolation Hospital, including 5 children from a camp at Overstrand.

Enteric Fever. 2 cases were notified—1 a double infection with Typhoid and Paratyphoid "B", whose history suggested the possibility of infection when on holiday away from Norwich; in the other case, one of Paratyphoid "B", the source of infection was not traced.

The second case made a good recovery—the case of double infection was still in hospital at the end of the year, and progressing satisfactorily.

Cerebro-Spinal Fever produced 2 cases—a fatal case in a girl of 5 years, and a girl aged 15 years who made a good recovery.

1 case of **Encephalitis Lethargica** was notified and died. This was a case of long standing. Another death occurred outside the City of a person ordinarily resident in Norwich.

NOTIFICATIONS OF SCARLET FEVER & DIPHTHERIA
1880 – 1938

Scarlet Fever ——————
Diphtheria - - - - - - -

No. of CASES.

1100 1050 1000 950 900 850 800 750 700 650 600 550 500 450 400 350 300 250 200 150 100 50 0

1880 1 2 3 4 5 6 7 8 9 1890 1 2 3 4 5 6 7 8 9 1900 1 2 3 4 5 6 7 8 9 1910 1 2 3 4 5 6 7 8 9 1920 1 2 3 4 5 6 7 8 9 1930 1 2 3 4 5 6 7 8

YEAR.

Puerperal Fever produced 2 notifications. Both were confined at home, 1 being a private doctor's case and the other a Maternity Home district case. Both were subsequently treated at the Norfolk and Norwich Hospital. 1 case recovered and the other died, the cause of death being puerperal pyrexia due to gangrenous endometritis, gangrene of left ovary and suppurative parametritis.

Puerperal Pyrexia produced 23 notifications, 3 less than in 1937 or 1936. The final diagnoses in these cases were as follows:—

Influenza	1
Bronchitis	1
Pyelitis	3
Perineal Abscess	1
Mastitis	2
Constipation	1
Lobar pneumonia...	1
Endometritis	1
Sapræmia	2
Boils on buttocks	1
Phlebitis	1
Thrombosis and broncho-pneumonia ...	1
Leukæmia	1
Local sepsis of vagina	2
Mitral stenosis	1
Cystitis	1
Unascertainable	2

7 cases occurred in the Council's Maternity Home, and 6 were Maternity Home district cases. 3 of the "home" cases were admitted to the Isolation Hospital and 1 to the Norfolk and Norwich Hospital; of the district cases, 2 were removed to the Isolation Hospital, where 1 died, the cause of death being (i) Puerperal Sepsis (ii) Phlebitis; the other cases recovered. 1 case occurred in the Public Assistance Institution and recovered.

141 cases of **Acute Primary** and 13 of **Acute Influenzal Pneumonia** were notified, totalling 154. This is a decrease of 16 compared with the figures for 1937. Acute Primary Pneumonia caused 15 deaths and Acute Influenzal Pneumonia 3, a total decrease of 19 compared with 1937. 5 cases of Acute Primary Pneumonia were treated at the Isolation Hospital, with no death.

The arrangements with regard to the supply of serum and typing of the organism remain available.

One of the sulphonamide preparations—viz., M & B 693, has come into use extensively in the treatment of pneumonia

during the present year, and the results reported to date are distinctly promising.

Erysipelas with 41 cases and no deaths showed a further decrease on the four previous years.

The outbreak of **Dysentery of the "Sonne Type"** continued during the early part of the year. 153 cases were notified by Practitioners; all except 1 in the first half of the year.

Whooping Cough. There were 4 deaths in children under school age. Prophylactic vaccination against whooping cough continues to be practised in a few cases. **Measles.** There were 4 deaths from this disease, 3 being children under school age.

INFECTIOUS DISEASES IN SCHOOLS.

This matter receives comment on pages 171-174. No City school has been closed on account of infectious disease for many years.

CLEANSING AND DISINFECTION.

The cleansing and disinfection of verminous persons can be carried out at the Public Assistance Institution in Bowthorpe Road, where, whilst the person is bathed, the clothing is disinfected. After infectious illness, bedrooms, etc., have been disinfected with formalin or sulphur, and occasionally bedding and clothing passed through the steam disinfector at the Isolation Hospital gratuitously. On request, the disinfection of articles for trade purposes and after non-infectious illnesses is carried out at the Isolation Hospital, and a charge is made in accordance with the Committee's scale.

It is the practice of the Council to insist on the disinfection of furniture and bedding of all tenants removed to the Council Estates (1919 houses excepted). See pages 44-45.

737 rooms were disinfected after the removal or recovery of patients. 708 visits were made by the Sanitary Inspectors in respect of infectious diseases.

In cases where the dwelling-house is in an insanitary condition and the occupier is unable, through infirmity or mental incapacity, to remedy the condition, and the health of persons residing in the house is endangered, the Corporation, under the Norwich Corporation Act, 1933, may apply to a Court of Summary Jurisdiction for an Order for the removal of the occupants to an Institution or other dwelling for such period as is necessary to enable the Corporation to cleanse and disinfect the house. No case was dealt with under these powers.

TABLE 3. NOTIFIABLE DISEASES.

Diseases.	Total Cases Notified by Medical Practitioners.	Cases Admitted to Hospital.	Total Number of Deaths of City persons.
Scarlet Fever	(*a*) 180	147	—
Diphtheria	(*b*) 169	169	9
Acute Primary Pneumonia	(*c*) 141	73	17
Acute Influenzal Pneumonia	13	1	3
Ophthalmia Neonatorum...	9	7	—
Puerperal Fever ...	2	2	1
Puerperal Pyrexia ...	(*d*) 23	12	—
Erysipelas	(*e*) 41	18	—
Cerebro-Spinal Fever ...	2	2	1
Encephalitis Lethargica ...	1	1	(*m*) 2
Malaria	1	1	—
Undulant Fever ...	1	1	—
Dysentery	(*f*) 153	(*g*) 22	—
Paratyphoid Fever ...	2	2	—

NON-NOTIFIABLE DISEASES.

Measles	(*h*) 67	(*i*) 43	4
Whooping Cough ...	24	20	4
Chicken-pox	(*j*) 51	(*k*) 22	—
Rubella	3	(*l*) 3	—

(*a*) Includes 5 non-residents who contracted Scarlet Fever whilst in Norwich.
(*b*) Includes 7 non-residents who contracted Diphtheria whilst in Norwich, and 1 non-civilian. 1 non-resident died.
(*c*) Includes 2 non-residents who contracted Acute Primary Pneumonia whilst in Norwich.
(*d*) Includes 2 non-residents who contracted Puerperal Pyrexia whilst in Norwich.
(*e*) Includes 2 non-residents who contracted Erysipelas whilst in Norwich.
(*f*) Includes 5 non-residents who contracted Dysentery whilst in Norwich.
(*g*) Contracted disease whilst in Hospital.
(*h*) Includes 2 non-residents who contracted Measles whilst in Norwich.
(*i*) Includes 1 case admitted to Hospital for Scarlet Fever and 1 admitted as a Diphtheria Carrier.
(*j*) Includes 2 non-residents who contracted Chicken Pox whilst in Hospital.
(*k*) Includes 14 cases admitted to Hospital for other reasons.
(*l*) Includes 2 cases admitted to Hospital for Scarlet Fever.
(*m*) Includes one person ordinarily resident in Norwich who died outside the City.

TABLE 4.

ANALYSIS OF TOTAL CASES OF INFECTIOUS DISEASES NOTIFIED IN AGE GROUPS.

Disease.	Under 1	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65 & over	Total
Diphtheria	1	3	4	10	11	74	35	10	18	1	2	—	169
Scarlet Fever	1	4	12	12	27	89	17	7	8	3	—	—	180
Erysipelas	—	—	—	—	—	1	—	1	6	10	14	9	41
Pneumonia (Acute Primary) ...	1	2	3	4	3	30	5	5	29	25	23	11	141
Pneumonia (Acute Influenzal) ...	1	—	—	—	—	—	—	—	4	1	4	3	13
Puerperal Fever	—	—	—	—	—	—	—	—	2	—	—	—	2
Puerperal Pyrexia	—	—	—	—	—	—	—	2	16	5	—	—	23
Cerebro-Spinal Fever	—	—	—	—	—	1	—	1	—	—	—	—	2
Paratyphoid Fever	—	—	—	—	—	—	—	1	—	1	—	—	2
Encephalitis Lethargica ...	—	—	—	—	—	—	—	—	—	—	1	—	1
Malaria	—	—	—	—	—	—	—	—	1	—	—	—	1
Undulant Fever	—	—	—	—	—	—	—	—	1	—	—	—	1
Dysentery	5	3	8	9	8	37	13	9	21	12	16	12	153
Rubella	—	—	1	—	1	1	—	—	—	—	—	—	3
Chickenpox	1	7	3	3	5	28	3	1	—	—	—	—	51
Measles	6	9	5	5	9	19	1	6	7	—	—	—	67
Whooping Cough	6	3	3	4	5	3	—	—	—	—	—	—	24

TABLE 5.

ANALYSIS OF DEATHS FROM NOTIFIED DISEASES IN AGE GROUPS.

Disease.	Under 1	1—2	2—3	3—4	4—5	5—10	10—15	15—20	20—35	35—45	45—65	65 & over	Total
Diphtheria	—	—	1	1	—	6	1	—	—	—	—	—	9
Cerebro-Spinal Fever	—	—	—	—	—	1	—	—	—	—	—	—	1
Acute Primary Pneumonia ...	—	—	—	—	—	—	—	—	1	3	8	5	17
Acute Influenzal Pneumonia ...	—	—	—	—	—	—	—	—	—	—	1	2	3
Encephalitis Lethargica ...	—	—	—	—	—	—	—	—	—	—	2	—	2
Measles	1	1	1	—	—	1	—	—	—	—	—	—	4
Whooping Cough	3	—	1	—	—	—	—	—	—	—	—	—	4

TABLE 6.

ATTACK RATE PER 1000 PERSONS UNDER 15 YEARS OF AGE NOT KNOWN TO HAVE HAD DISEASE PREVIOUSLY.

(*a*) Cases Removed to Hospital.

In houses with :—

		Less than 1 person per room.	1 to 2 persons per room.	2 to 3 persons per room.	3 to 4 persons per room.	4 to 5 persons per room.	5 to 6 persons per room.	6 to 7 persons per room.	Over 7 persons per room.	
Scarlet Fever	460	—	613	344	500	250	333	—	—	Per 1000 persons under 15 years who have not had disease
Diphtheria...	419	1000	525	325	400	—	—	—	—	,, ,,

(*b*) Cases Nursed at Home.

In houses with :—

		Less than 1 person per room.	1 to 2 persons per room.	2 to 3 persons per room.	3 to 4 persons per room.	4 to 5 persons per room.	5 to 6 persons per room.	6 to 7 persons per room.	Over 7 persons per room.	
Scarlet Fever	600	613	500	—	—	—	—	—	—	Per 1000 persons under 15 years who have not had disease
Diphtheria...	—	—	—	—	—	—	—	—	—	,, ,,

VACCINATION.

The following are particulars of the work done under the Vaccination Acts.

Number of Births registered in 1937			2002
Number of Children :—			
Successfully Vaccinated		323	
Insusceptible of Vaccination ...		1	
In respect of whom Statutory Declarations of Conscientious Objection have been received		1508	
Died unvaccinated (under 1 year of age)		99	
Postponed by Medical Certificate ...		4	
Removed to districts the Vaccination Officers of which have been duly apprised		48	
Removed to places unknown and otherwise not accounted for		19	
			2002
Percentage successfully vaccinated (excluding deaths)		16.9%	
Percentage of Conscientious Objectors (excluding deaths)		79.2%	

SUCCESSFUL VACCINATIONS, 1938.

Total number of Certificates of successful Primary Vaccinations of Children under 14 received during 1938	308
Number of Certificates of successful Primary Vaccinations by the Public Vaccinator of persons over 14 received during 1938 ...	23
Number of successful re-Vaccinations by the Public Vaccinator of persons of all ages during 1938	8

ISOLATION HOSPITAL AND LABORATORY.

The Isolation Hospital continues to play an important part in the health service of the City, and to enjoy the confidence of the citizens, as is shown by the high percentage of notified cases which are sent there.

The percentages are :—

Scarlet Fever	...	...	...	76.66%
Diphtheria	...	...	...	95.89%
Enteric Fever	...	...	...	100.00%

The following is the Resident Medical Officer's report on the year's work :—

During the year 1938, the total number of cases admitted was 622, as compared with 632 for 1937, 647 for 1936, and 634 for 1935. This number, with 77 remaining from 1937, gives a total of 699 under treatment for the year.

TABLE 7.

(Showing disease distribution and mortality rates.)

	Remaining in Hospital midnight, Dec. 31st, 1937.	Admitted during 1938.	Total under Treatment.	Discharged during 1938.	Died during 1938.	Mortality Rate %.	Remaining in Hospital midnight, Dec. 31st, 1938.
Scarlet Fever ...	22	150	172	165	—	—	7
Diphtheria ...	21	164	185	143	10	6.53	32
Diphtheria Carriers	2	64	66	59	—	—	7
Enteric Fever ...	—	3	3	2	—	—	1
T.B. Phthisis ...	21	41	62	25	17	40.47	20
Other Diseases ...	11	200	211	189	7	3.57	15
	77	622	699	583	34	—	82

The mortality rate for all cases completing treatment was 5.51%.

The average daily number of patients in hospital was 68.60; maximum number 101 on 13th December, 1938; minimum number 44 on 9th, 11th and 15th June, 1938.

The average period in hospital for all cases completing treatment (deaths included) during the year was 41.77 days.

TABLE 8.

(Showing monthly admissions.)

	Scarlet Fever	Diphtheria.	Diph. Carriers.	Enteric Fever.	Tuberculosis	Other Diseases.	Total.
January ...	22	19	3	1	5	25	75
February ...	19	11	5	—	4	17	56
March ...	19	2	3	—	2	23	49
April ...	14	—	2	—	3	12	31
May	7	5	1	—	1	21	35
June	5	10	13	—	5	12	45
July	15	12	3	1	3	14	48
August ...	4	20	9	—	1	11	45
September ...	17	23	6	—	2	16	64
October ...	6	12	8	1	6	13	46
November ...	11	34	8	—	4	14	71
December ...	11	16	3	—	5	22	57
	150	164	64	3	41	200	622

TABLE 9.

(Showing monthly discharges.)

	Scarlet Fever	Diphtheria.	Diph. Carriers.	Enteric Fever.	Tuberculosis.	Other Diseases.	Total.
January ...	25	11	2	—	2	25	65
February ...	20	9	3	1	1	17	51
March ...	17	22	5	—	7	18	69
April ...	25	6	3	—	1	15	50
May	9	6	3	—	2	18	38
June	7	4	2	—	6	18	37
July	7	4	9	—	4	17	41
August ...	13	15	11	—	6	10	55
September ...	10	16	5	1	7	16	55
October ...	11	15	6	—	3	14	49
November ...	8	23	6	—	—	9	46
December ...	13	22	4	—	3	19	61
	165	153	59	2	42	196	617

SCARLET FEVER.

150 cases were admitted in 1938 (including 12 County infections) which, with 22 remaining from 1937, gives a total of 172 cases under treatment.

AVERAGE STAY. The average period in hospital for cases completing treatment during the year was 24.94 days, as compared with 26.49 days in 1937 and 32.78 days in 1936.

Administration of Anti-Scarlet Fever serum is adopted as a routine in cases of Scarlet Fever where the rash is pronounced or the pharyngitis is intense.

A few cases have been treated with one of the sulphonamide preparations instead of with serum, but their numbers are insufficient to make any observations upon them.

No death occurred.

TABLE 10.

(Showing Age and Sex distribution of 1938 admissions.)

	Under 1	1-2.	2-3.	3-4.	4-5.	5-10.	10-15.	15-20.	20-25.	25-35.	35-45.	Over 45.	Totals
Male	1	1	6	5	11	36	4	3	2	—	1	—	70
Female	—	2	6	8	8	33	12	4	3	4	—	—	80
	1	3	12	13	19	69	16	7	5	4	1	—	150

Complications in Scarlet Fever cases completing treatment in 1938, 1937, 1936 and 1935.

	All Cases 1938.	1937.	1936.	1935.
Adenitis ...	2= 1.21%	4.51%	10.30%	11.32%
Otorrhœa ...	5= 3.03%	3.45%	7.27%	6.29%
Arthritis and Rheumatism ...	0= 0.00%	1.04%	2.42%	1.88%
Nephritis and Albuminuria ...	1= 0.60%	0.34%	7.88%	4.40%
Rhinorrhœa ...	1= 0.60%	1.73%	0.61%	1.26%

Albuminuria occurring in the early febrile period of the disease is not included in these figures.

OTHER COMPLICATIONS. Serum Rash 5; Appendicectomy 1; Blepharitis 1; Tonsillitis 1; Mastoid 1; Septicæmia 1; Laryngitis 1; Bronchitis 1; Urticarial rash 1; Septic sores 1; Myocarditis 1; Septic finger 1.

3 return cases were admitted during the year, equivalent to 2.17% of the City cases admitted. A patient is regarded as a

return case if further infection occurs in a household within 4 weeks of the return of a case from hospital. 1 case was incubating Rubella on admission and 1 case was incubating Measles on admission. No further cases occurred. 2 cases had positive Diphtheria swabs on admission. 1 case was also suffering from Chicken Pox on admission, and 1 case that was incubating Chicken Pox on admission infected 6 other cases.

DIPHTHERIA.

164 cases of true Diphtheria (including 1 County infection and 1 City child from a camp at Overstrand) were admitted during 1937, which, with 21 remaining from 1937, give a total of 185 under treatment.

64 Carriers of the Diphtheria bacillus (including 2 County infections and 5 City children from a camp at Overstrand) in whom no evidence of the disease existed, were taken into hospital until they ceased to be infectious.

The type of Diphtheria showed itself clinically as for the most part moderately severe, with an increase in the number and severity in the second half of the year.

Tracheotomy was required in 2 cases of Laryngeal Diphtheria, 1 of which died.

DEATHS. 10 deaths occurred (1 a non-resident). Mortality rate 6.5%.

AVERAGE STAY. The average period in hospital for cases who completed treatment during the year was 48.52 days, the figure for 1937 was 55.29 days and for 1936 was 54.37 days.

TABLE 11.

(Showing Age and Sex distribution of 1938 admissions.)

	Under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-25	25-35	35-45	Over 45	Total.
Male	—	2	2	2	5	26	14	3	3	3	—	—	60
Female	1	—	1	6	4	49	20	7	7	6	1	2	104
	1	2	3	8	9	75	34	10	10	9	1	2	164

Complications in Diphtheria cases completing treatment during 1938:—

Otorrhœa	2	Heart	2
Paralysis	8	Bronchitis	1
Tonsillitis	2	Septic Spots	1
Cervical Abscess ...	1	Furunculosis ...	1
Neuritis	2	Positive Vaginal Swab	1
Broncho Pneumonia ...	1	Nasal Phonation ...	2
Pulmonary Congestion	1		

SERUM. The average quantity of serum administered to each case was 33,576 units. Several patients had a quantity of serum

administered before admission, and this amount has been included. The largest amount given to any one case was 260,000 units. A definite serum reaction occurred in 34 cases.

ENTERIC FEVER.

3 cases were admitted (including 1 County case) and 2 were discharged, 1 remaining. The 2 discharged cases were Paratyphoid "B", and both made uncomplicated recoveries. The other was a double infection of Typhoid and Paratyphoid "B", and was making a good recovery after a lengthy illness, but was still in hospital at the end of the year.

OTHER DISEASES.

Admissions numbered 200, distributed as under :—

Vincent's Angina ...	1	Dermatitis	1
Erysipelas	13	Tapeworm	1
Bronchitis	3	Measles, Whooping Cough and Broncho Pneumonia ...	2
Food Rash	1	Abortus Fever ...	1
Chicken Pox ...	1	Hæmolytic Streptococcal Carrier ...	1
Injured Foot... ...	1	Acute Primary Pneumonia ...	5
Quinsy	1	Whooping Cough ...	6
Adenitis	1	Puerperal Pyrexia ...	5
Nursing Mothers ...	12	Encephalitis Lethargica	1
Broncho-Pneumonia ...	5	Debility	2
Ophthalmia Neonatorum	8	Observation	1
Tonsillitis	45	Cœliac Disease ...	1
Enteritis	1	Abscess of Neck ...	1
Constipation ...	1	Septic Finger ...	1
Suckling Infants ...	12	Post-Measles Ophthalmia ...	1
Malnutrition ...	4	Peri Nephric Abscess	2
Peripheral Neuritis ...	1	Catarrh	1
Malæna	1	Rubella	1
Measles	14	Pulmonary Congestion	1
Measles and Broncho-Pneumonia ...	7	Influenzal Meningitis...	1
Earache	1	Poliomyelitis ...	1
No Infectious Disease...	15	Laryngitis	2
Rheumatism ...	1	Marasmus	1
Puerperal Sapræmia ...	1	Tonsillitis and Dermatitis ...	1
Whooping Cough and Broncho-Pneumonia	2	Mumps	1
Puerperal Sepsis ...	1	Indigestion	1
Puerperal Sepsis and Phlebitis	1		
Jaundice	1		
Varicose Ulcer ...	1		

The following deaths occurred amongst these patients:— Jaundice 1; Puerperal Sepsis and Phlebitis 1; Influenzal Meningitis 1; Measles and Broncho Pneumonia 2; Malæna Neonatorum 1; Peripheral Neuritis 1.

The average length of stay in hospital for those who completed treatment was 19.10 days.

TUBERCULOSIS.

2 ward blocks are still in use for the isolation of cases (mostly advanced) of this disease.

ADMISSIONS. 41 cases were admitted during the year, 17 male and 24 female.

DIED. Males 11. Females 6. Total 17.

DISCHARGED. Males 8—1 to own home, condition improved; 4 to own homes, condition as on admission; 2 to own homes at the patients' requests; and 1 to the Norfolk and Norwich Hospital.

Females 17—10 to own homes, condition improved; 5 to own homes, condition as on admission; 1 to own home at the patient's request; and 1 to the Infirmary.

AVERAGE STAY. The average period in hospital for cases that completed treatment during the year was 212.85 days.

COUNTY CASES.

The arrangements made in 1931 with some of the surrounding County districts continued in the early part of the year until the opening of the County Isolation Hospital. 25 County cases included in the figures mentioned above were admitted during the year, and were distributed as under:—

Scarlet Fever ...	12	Measles	4
Diphtheria	1	Tonsillitis	1
Diphtheria Carriers ...	2	Encephalitis Lethargica	1
Polioencephalitis ...	1	Ophthalmia Neonatorum	1
Enteric Fever ...	1	Nursing Mothers ...	1

LABORATORY WORK.

5175 specimens were examined, as compared with 4305 in 1937; details of examinations are appended :—

	Diphtheria.	Tuber-culosis.	Typhoid.	Others.	Total.
January	507	6	—	5	518
February	469	5	—	1	475
March	396	4	—	5	405
April	165	4	1	—	170
May	184	7	1	3	195
June	339	1	—	2	342
July	446	3	—	—	449
August	504	2	1	—	507
September ...	583	—	—	—	583
October	415	7	1	—	423
November ...	614	5	—	3	622
December ...	484	1	—	1	486
	5106	45	4	20	5175

Daily Tests (Sundays included) 14.17.

The above figures do not include 884 specimens of sputum examined by the Clinical Tuberculosis Officer at the Laboratory at the Public Health Department.

STAFF.

The Health of the Nursing and Domestic Staffs remained satisfactory throughout the year, except for 3 cases of Diphtheria —2 in the Nursing and 1 in the Domestic Staff.

Both the Nursing Staff cases were of a mild type, with uncomplicated recoveries; they had been Schick tested before joining the staff.

The case in the Domestic Staff was of a fairly mild type, and made an uncomplicated recovery, but had to return to hospital some three weeks later for a further spell of treatment as a Carrier. She had been Schick negative when tested on first joining the staff, and was working in a Diphtheria ward where there were several severe cases.

The work of the Nursing and Domestic Staffs, under the able guidance of the Matron, has again been thoroughly satisfactory throughout the year, and I take this opportunity of recording it.

TUBERCULOSIS

TUBERCULOSIS.

NOTIFICATIONS AND MORTALITY DURING 1938.

Age Periods.	New Cases.						Deaths.					
	Pulmonary.			Non-Pulmonary			Pulmonary.			Non-Pulmonary.		
	M.	F.	Total	M.	F.	Total	M.	F.	Total	M.	F.	Total
Under 1 year ...	—	—	—	—	—	—	—	—	—	—	1	1
1— 5 years ...	—	—	—	4	1	5	1	—	1	—	—	—
5—15 ,, ...	2	—	2	10	6	16	—	—	—	1	—	1
15—25 ,, ...	9	6	15	5	3	8	6	6	12	1	—	1
25—35 ,, ...	11	13	24	3	6	9	8	4	12	—	—	—
35—45 ,, ...	11	7	18	—	2	2	11	4	15	—	—	—
45—55 ,, ...	9	6	15	1	—	1	10	2	12	—	—	—
55—65 ,, ...	8	1	9	1	—	1	4	3	7	2	—	2
65 and over ...	4	2	6	—	—	—	3	1	4	1	—	1
TOTALS ...	54	35	89	24	18	42	43	20	63	5	1	6

In addition to the 131 cases newly notified, 23 further cases came to my notice during 1938 in other ways than by formal notification. 5 were obtained from the death returns, 15 were transfers to the City from other areas, and 3 posthumous notifications were received. 11 were pulmonary cases and 12 non-pulmonary, distributed as follows:—

Age periods.	Pulmonary.			Non-Pulmonary.		
	M.	F.	Total.	M.	F.	Total.
Under 1 year ...	—	1	1	—	—	—
1— 5 years ...	1	—	1	—	1	1
5—15 ,, ...	—	—	—	2	1	3
15—25 ,, ...	1	1	2	—	2	2
25—35 ,, ...	2	2	4	—	3	3
35—45 ,, ...	1	1	2	—	—	—
45—55 ,, ...	—	—	—	—	—	—
55—65 ,, ...	—	—	—	2	1	3
65 and over ...	—	1	1	—	—	—
	5	6	11	4	8	12

In all, 154 cases of tuberculosis, 100 lung and 54 other forms, came to my knowlelge during the year. The non-pulmonary cases were classified as follows:—

Age periods	Bones and joints.	Abdominal.	Peripheral glands.	Lupus.	Other Organs.
Under 1 year ...	—	—	—	—	—
1— 5 years ...	1	—	5	—	—
5—15 ,, ...	2	2	15	—	—
15—25 ,, ...	4	1	3	—	2
25—35 ,, ...	2	—	7	3	—
35—45 ,, ...	—	—	1	—	1
45—55 ,, ...	—	—	—	1	—
55—65 ,, ...	—	2	—	—	2
65 and over ...	—	—	—	—	—
Totals ...	9	5	31	4	5*

*These consisted of 1 each of miliary, mastoid, breast, anal fissure and pancreas.

Of the cases notified, 56.5 per cent. were males and 43.5 per cent. were females. 43.8 per cent. were married, 51.8 per cent. were single, and 4.4 per cent. were widowed. Information obtained from 134 of the cases revealed a family history of tuberculosis in 38 per cent. The average age at the time of notification was as follows:—

Pulmonary Males	40.26 years
Pulmonary Females	36.74 ,,
Non-Pulmonary Males	15.79 ,,
Non-Pulmonary Females	19.67 ,,
Pulmonary Males and Females ...	38.88 ,,
Non-Pulmonary—Males and Females	17.45 ,,
All Forms—Males and Females ...	32.01 ,,

Notifications of new pulmonary cases showed a slight increase on the previous year's figures, which were by far the lowest on record. In only two previous years, 1935 and 1937, did the notifications of new pulmonary cases fall below 110, and the number for the past year, namely 89, can be regarded as satisfactory. The corresponding figure for 1937 was 84.

Notifications of non-pulmonary cases also showed a slight increase. 42 cases were notified, compared with 40 in the preceding year.

A perusal of the notification table will show that in almost all age groups male notifications exceeded female notifications. One age group, 25-35 years, was an exception in this respect.

Deaths from all forms of tuberculosis numbered 69, which is the lowest figure on record. The previous lowest total figure was 72 in 1937.

Pulmonary Tuberculosis accounted for 63 deaths, an increase of 2 on the previous year's number. The non-pulmonary tuberculosis deaths numbered only 6. Three of these 6 deaths occurred in males over the age of 55. Among females there was only 1 death from non-pulmonary tuberculosis, and that occurred in an infant under the age of 12 months. A pleasing feature in the year's mortality figures is the absence of deaths from meningitis, previously so common, and this fact would point to the greater vigilance and care exercised in tuberculous families against the possibility of infection, and it may also reflect upon the decrease of overcrowding as a result of activities under the various Housing Acts. It has been the aim of the Committee to ensure that open cases of tuberculosis have a bedroom for their sole use.

A survey of the table setting forth the deaths and death rates from tuberculosis and the accompanying graphs will show the satisfactory trend of the figures, which continue to show a progressive decrease.

The deaths occurred at the following periods during 1938:—

	Pulmonary.		Non-Pulmonary.	
January	6		1	
February	6	19	—	2
March	7		1	
April	7		—	
May	2	15	—	1
June	6		1	
July	6		1	
August	5	16	—	1
September	5		—	
October	4		1	
November	1	13	1	2
December	8		—	

Of the total deaths from tuberculosis, 8 or 11.6 per cent. had not been notified during life. No special action was taken in these cases, as there was no evidence of wilful neglect or refusal to notify.

DEATHS AND DEATH-RATES FROM TUBERCULOSIS.

Year.	Population.	Deaths.			Death-rate per 1000 of population		
		Pulmonary Tuberculosis.	Non-Pulmonary Tuberculosis.	Tuberculosis (all forms).	Pulmonary Tuberculosis.	Non-Pulmonary Tuberculosis.	Tuberculosis (all forms)
Av. 1893 to 1899 (inclus.)	108,672	138	93	231	1·27	0·85	2·12
Av. 1900 to 1909 (inclus.)	117,052	144	87	231	1·23	0·74	1·97
Av. 1910 to 1919 (inclus.)	118,824	138	59	197	1·16	0·50	1·66
1920	125,700	125	38	163	1·0	0·30	1·30
1921	122,400	147	26	173	1·20	0·21	1·41
1922	122,900	135	32	167	1·10	0·26	1·36
1923	123,600	128	21	149	1·03	0·17	1·20
1924	123,900	121	30	151	0·98	0·24	1·22
1925	124,000	117	22	139	0·94	0·18	1·12
1926	123,500	91	22	113	0·73	0·18	0·91
1927	124,600	109	26	135	0·87	0·21	1·08
1928	124,700	81	13	94	0·65	0·10	0·75
1929	124,900	100	18	118	0·80	0·14	0·94
1930	124,900	78	12	90	0·624	0·096	0·72
1931	126,100	77	11	88	0·61	0·08	0·69
1932	126,600	100	12	112	0·79	0·09	0·88
1933	126,100	93	15	108	0·737	0·118	0·855
1934	125,700	97	20	117	0·77	0·16	0·93
1935	124,700	77	9	86	0·62	0·07	0·69
1936	123,700	75	23	98	0·606	0·186	0·792
1937	123,000	61	11	72	0·5	0·089	0·58
1938	122,300	63	6	69	0·515	0·049	0·56

Dispensary Work.

In addition to the Administrative Tuberculosis Officer, the staff consists of a Clinical Tuberculosis Officer, a Health Visitor, and 1 Clerk.

There are 4 dispensary sessions weekly, 1 of which is reserved for children, where opportunity is taken to see suspected cases referred by the School Medical Officers and Officers of the Infant Welfare Centres, and also contacts of definitely tuberculous cases.

The Clinical Tuberculosis Officer made 1581 examinations, 1450, including contacts, at the Clinic, and 131 at the patients' homes.

During the year, 115 *contacts* were examined for the first time. These were in addition to the contacts examined at the School Clinics and Infant Welfare Centres, where the facilities for observation were utilised as much as possible. To assist in

the co-operation of supervision of school children who are contacts of pulmonary cases, record cards have been provided so that School Medical Officers may make observations on their progress at the time of school inspection. Full use was made of the Open-Air School and, through the Invalid Children's Aid Association, of the Convalescent Homes in the county for those contacts who were found to be debilitated.

1 contact was found to be suffering from pulmonary tuberculosis, and notified accordingly. The invitation to appear for examination is extended wherever possible. In the case of children, the offer is almost universally accepted, but there is still reluctance on the part of some adults, who feel they have nothing to gain and everything to lose. Such an outlook may be sufficient for to-day, but, as frequently happens, it may be an ill-advised policy for the future.

The *X-ray work* in connection with the Dispensary was undertaken by Dr. J. S. Levack, D.M.R.E., and in his absence by Dr. J. Staines-Austin, D.M.R.E., whose co-operation has been most helpful. During the year, 288 X-ray examinations were made of 259 pulmonary and 29 non-pulmonary cases. In dispensary work, this mode of examination is employed more and more frequently, especially in cases of early and doubtful disease.

884 *sputum examinations* were done during the year, including examinations done for general practitioners. Facilities for free examination of sputum are available at the Public Health Department and the Isolation Hospital.

27 patients were referred for *dental treatment*, which was undertaken by the Dental Department at Churchman House. In 16 cases dentures were supplied. In addition, the Committee occasionally accepted financial responsibility for dental treatment of cases in Sanatoria.

Operative measures, such as artificial pneumothorax and phrenicectomy were undertaken at the Norfolk and Norwich Hospital, or, where the patient was in a sanatorium, through the arrangements made by the sanatorium authority.

Home Visits.

The Tuberculosis Health Visitor, in addition to 112 primary visits paid for the purpose of ascertaining the environmental conditions of newly-notified cases, made 1260 re-visits to old cases.

At the time of the first visit, 40.5 per cent. of the cases at home occupied a separate bedroom, 12.2 per cent. a separate bed, and 47.3 per cent. shared a bed with another person, presumably non-tuberculous.

The percentage of cases, where enquiry was made, who at the time of the first visit were occupying a separate bedroom, has varied as follows:—

1922		46.3	1931		50.1
1923		43.5	1932		49.0
1924		44.0	1933		40.7
1925		43.3	1934		34.7
1926		35.2	1935		35.3
1927		41.0	1936		33.2
1928		50.3	1937		35.1
1929		48.4	1938		40.5
1930		49.2			

In addition to the visits of the Health Visitor, 2682 visits were paid by the Nurses from the Cavell Home. These visits are made on the recommendation of the Clinical Tuberculosis Officer and the general practitioners concerned.

209 of these visits were made for the compilation of temperature pulse records for diagnostic purposes and the remaining 2473 were made for the purpose of home nursing.

Institutional Treatment.

(*i.*) 35 beds are reserved for male patients at Kelling Sanatorium, where additional beds are taken temporarily as required. 9 beds are reserved for women at Bramblewood Sanatorium. Patients were also sent to the East Anglian Sanatorium, Nayland; Preston Hall; Papworth Village Settlement, Cambridge, and the Norfolk and Norwich Hospital.

(*ii.*) Isolation Hospital—2 pavilions, 12 beds for males and 12 for females.

(*iii.*) Cases of surgical tuberculosis in adults were sent to St. Michael's Orthopædic Hospital, Clacton; Papworth Village Settlement; Addenbrooke's Hospital; The Fletcher Convalescent Home, Cromer; and the local general hospital.

Children were sent to The Lord Mayor Treloar Cripples' Hospital at Alton; the Children's Sanatorium, Holt; the local general hospitals; The Fletcher Convalescent Home, Cromer; and Melton Lodge, Great Yarmouth.

4 lupus patients were sent for light treatment at the London Hospital and made 882 attendances. The Council paid travelling and maintenance allowances in 2 cases.

3 lupus patients made 80 attendances for light treatment at the Norfolk and Norwich Hospital. 1 lupus patient was sent for light treatment to Dr. J. S. Austin and made 59 attendances.

8 patients with tuberculous neck glands made 178 attendances for light treatment at the local general hospitals.

2 patients with other tuberculous diseases made 81 attendances for light treatment at the local general hospital.

254 artificial pneumothorax refills were given at the Norfolk and Norwich Hospital Out-Patient Department in respect of 17 patients. 1 patient, after discharge from Kelling Sanatorium, attended as an Out-Patient and was given 2 artificial pneumothorax refills.

(*iv.*) The Poor Law Infirmary was also utilised when necessary for pulmonary and non-pulmonary cases.

The total number of cases of pulmonary tuberculosis treated in Institutions (other than Poor Law Institutions) during the year numbered 108 adult males and 70 adult females. Non-pulmonary cases who received treatment in Institutions outside the City were 13 adult males, 6 adult females and 19 children. 3 adult males, 1 adult female and 17 children were treated in the general hospitals in the City.

The following table shows the average daily number of patients at each Institution, together with the duration of stay of those patients discharged during 1938. The figures in parentheses show the highest number of patients—patients on leave are regarded as being under treatment. During the year, 23 deaths occurred in the Institutions.

Institution.	Average daily No. of patients.	Length of Stay of patients discharged.			
		Under 3 mnths. but exceeding 28 days.	3 to 6 months.	6 to 12 months.	Over 12 months.
(*a*) *Pulmonary Cases.*					
Kelling Sanatorium ... (38)	35.09	7	9	10	13
Bramblewood Sanatorium ... (12)	10.21	1	7	9	2
East Anglian Sanatorium ... (2)	1.08	—	1	1	1
Isolation Hospital Males (13)	8.26	4	5	2	4
Isolation Hospital Females (17)	12.06	4	4	8	5
Papworth Village Settlement ... (9)	5.97	—	—	1	—
Norfolk and Norwich Hospital (2)	.43	—	1	—	—
Preston Hall ... (1)	.95	—	—	—	—
Totals (pulmonary) ...	74.05	16	27	31	25

Institution.	Average daily No. of patients.	Length of Stay of patients discharged.			
		Under 3 mnths. but exceeding 28 days.	3 to 6 months.	6 to 12 months.	Over 12 months.
(b) Non-Pulmonary Cases.					
Addenbrooke's Hospital (1)	.014	—	—	—	—
St. Michael's Orthopædic Hospital, Clacton (4)	2.73	—	1	1	2
Norfolk and Norwich Hospital (2)	.74	4	—	—	—
Lord Mayor Treloar Cripples' Hospital, Alton (4)	2.07	—	1	—	2
Fletcher Convalescent Home, Cromer ... (3)	.83	3	1	—	—
Jenny Lind Hospital... (2)	.49	2	—	—	—
Papworth Village Settlement ... (9)	6.38	2	1	—	—
Melton Lodge, Great Yarmouth ... (2)	1.97	—	—	—	2
Holt Children's Sanatorium ... (2)	.43	2	—	—	—
Totals (non-pulmonary)	15.654	13	4	1	6
GRAND TOTALS ...	89.704	29	31	32	31

The Council decided in February, 1936, that the institutional treatment of tuberculosis should remain free in all cases, irrespective of income, until further order.

Domiciliary Treatment.

Extra nourishment was supplied in necessitous cases. On the recommendation of the Clinical Tuberculosis Officer, orders were given for the supply of 66,369 pints of milk, 400 lbs. of butter, 10,648 eggs, 140 lbs. of cod liver oil and malt, and 84 Advita capsules.

Shelters, bedsteads and bedding are also provided on loan to such cases as are recommended for them. Paper handkerchiefs, pocket sputum flasks, and disinfectants are given for the ready

disposal of infected sputum. The disinfection of rooms vacated by patients who have gone for institutional treatment, or who have died, is offered in every case, and the offer continues to be met with almost universal acceptance.

Housing for Tuberculosis.

During the year, 15 families were transferred to the new estates of the City, in addition to the families affected by Clearance activities.

Literature.

As an educational measure, leaflets published by the National Association for the Prevention of Tuberculosis have been disposed of in connection with dispensary work. To patients and relatives, these leaflets have helped to supplement verbal advice given at the Dispensary or at home visitations.

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

No action was taken under these Regulations with regard to employees in the milk trade. No person in the milk trade was notified as suffering from tuberculosis.

PUBLIC HEALTH ACT, 1936. SECTION 172.

No action was taken under this Section with regard to the compulsory removal to Hospital of any person suffering from tuberculosis.

Statistics.

The charts show the tendencies of tuberculosis in previous years. In addition, the approximate number of working days lost due to unemployment for the last 16 years is given, these figures being kindly supplied by the Ministry of Labour Employment Exchange.

Diagnosis.	Pulmonary.				Non-Pulmonary.				Total.				Grand Total.
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New Cases examined during the year (excluding contacts) :—													
(*a*) Definitely tuberculous ...	47	32	2	—	7	5	12	6	54	37	14	6	111
*(*b*) Diagnosis not completed ...	—	—	—	—	—	—	—	—	7	6	2	—	15
(*c*) Non-tuberculous	—	—	—	—	—	—	—	—	53	81	39	56	229
B.—Contacts examined during the year :—													
(*a*) Definitely tuberculous ...	1	—	—	—	—	—	—	—	1	—	—	—	1
*(*b*) Diagnosis not completed ...	—	—	—	—	—	—	—	—	—	—	—	1	1
(*c*) Non-tuberculous	—	—	—	—	—	—	—	—	32	35	26	20	113
C.—Cases written off the Dispensary Register as :—													
(*a*) Recovered	3	3	—	1	4	—	3	7	7	3	3	8	21
(*b*) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous)	—	—	—	—	—	—	—	—	85	117	65	76	343
D.—Number of Cases on Dispensary Register on 31st December :—													
(*a*) Definitely tuberculous ...	285	175	11	11	50	51	93	84	335	226	104	95	760
(*b*) Diagnosis not completed ...	—	—	—	—	—	—	—	—	11	14	7	5	37

*i.e., remaining undiagnosed on 31st December.

RETURN SHOWING THE WORK OF THE TUBERCULOSIS DISPENSARY—*Continued.*

1. Number of cases on Dispensary Register on 1st January	750	2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	14
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of"	15	4. Cases written off during the year as Dead (all causes)	58
5. Number of attendances at the Dispensary (including Contacts) ...	1450	6. Number of Insured Persons under Domiciliary Treatment on the 31st December	183
7. Number of consultations with medical practitioners:—		8. Number of visits by Tuberculosis Officer to homes (including personal consultations)	131
(*a*) Personal	4		
(*b*) Other	319		
9. Number of visits to homes for Dispensary purposes:—		10. Number of:—	
(*a*) By Health Visitors	1372	(*a*) Specimens of sputum, etc., examined	884*
(*b*) By The Cavell Nurses ...	2682	(*b*) X-ray examinations made in connection with Dispensary work	288
11. Number of "Recovered" cases restored to Dispensary Register, and included in A(*a*) and A(*b*) page 119	1	12. Number of "T.B. plus" cases on Dispensary Register on 31st December	341

*Including those examined for general practitioners.

RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT AND OBSERVATION DURING THE YEAR IN INSTITUTIONS (OTHER THAN POOR LAW INSTITUTIONS) APPROVED FOR THE TREATMENT OF TUBERCULOSIS.

		In Institutions on Jan. 1st.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31st.
Number of doubtfully tuberculous cases admitted for observation ...	Adult males ...	—	—	—	—	—
	Adult females ...	—	—	—	—	—
	Children ...	—	—	—	—	—
	Total ...	—	—	—	—	—
Number of patients suffering from pulmonary tuberculosis	Adult males ...	49	59	45	16	47
	Adult females ...	24	46	40	7	23
	Children ...	—	—	—	—	—
	Total ...	73	105	85	23	70
Number of patients suffering from non-pulmonary tuberculosis	Adult males ...	6	10	9	—	7
	Adult females ...	3	4	6	—	1
	Children ...	7	29	30	—	6
	Total ...	16	43	45	—	14
GRAND TOTAL		89	148	130	23	84

RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT PROVIDED DURING THE YEAR IN POOR LAW INSTITUTIONS FOR PERSONS CHARGEABLE TO THE COUNCIL.

		In Institutions on Jan. 1st.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31st.
Number of patients suffering from pulmonary tuberculosis	Adult males ...	2	8	6	1	3
	Adult females ...	—	2	2	—	—
	Children ...	—	—	—	—	—
	Total ...	2	10	8	1	3
Number of patients suffering from non-pulmonary tuberculosis	Adult males ...	—	1	—	—	1
	Adult females ...	—	—	—	—	—
	Children ...	3	—	3	—	—
	Total ...	3	1	3	—	1
GRAND TOTAL		5	11	11	1	4

RETURN SHOWING THE IMMEDIATE RESULTS OF TREATMENT OF DEFINITELY TUBERCULOUS PATIENTS DISCHARGED DURING THE YEAR FROM INSTITUTIONS APPROVED FOR THE TREATMENT OF TUBERCULOSIS.

Classification on admission to the Institution.		Condition at time of Discharge.	Duration of Residential Treatment in the Institution.															Grand Totals.
			Under 3 months, but exceeding 28 days.			3-6 months.			6-12 months.			More than 12 months.			Totals.			
			M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
Pulmonary Tuberculosis.	Class T.B. minus.	Quiescent ...	—	—	—	1	—	—	—	1	—	—	—	—	1	1	—	2
		Not quiescent	2	—	—	—	—	—	1	—	—	—	—	—	3	—	—	3
		Died in Institution	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	1
	Class T.B. plus. Group I.	Quiescent ...	—	—	—	—	1	—	1	1	—	—	—	—	1	2	—	3
		Not quiescent	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	1
		Died in Institution	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	1
	Class T.B. plus. Group II.	Quiescent ...	—	—	—	—	1	—	1	3	—	—	—	—	1	4	—	5
		Not quiescent	4	1	—	4	6	—	5	9	—	10	5	—	23	21	—	44
		Died in Institution	1	—	—	—	—	—	—	—	—	1	—	—	2	—	—	2
	Class T.B. plus. Group III.	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Not quiescent	1	1	—	6	4	—	4	2	—	3	2	—	14	9	—	23
		Died in Institution	3	3	—	3	1	—	—	2	—	2	—	—	8	6	—	14

RETURN SHOWING THE IMMEDIATE RESULTS OF TREATMENT OF DEFINITELY TUBERCULOUS PATIENTS DISCHARGED DURING THE YEAR FROM INSTITUTIONS APPROVED FOR THE TREATMENT OF TUBERCULOSIS—*Continued.*

	Classification on admission to the Institution.	Condition at time of Discharge.	Duration of Residential Treatment in the Institution.															Grand Totals
			Under 3 months, but exceeding 28 days.			3-6 months.			6-12 months.			More than 12 months.			Totals.			
			M.	F.	Ch.	M.	F.	Ch	M.	F.	Ch	M.	F.	Ch.	M.	F.	Ch	
Non-Pulmonary Tuberculosis.	Bones and Joints.	Quiescent ...	—	—	3	—	—	1	—	1	—	—	—	4	—	1	8	9
		Not quiescent	2	—	1	1	—	1	—	—	—	—	2	—	3	2	2	7
		Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Abdominal.	Quiescent ...	1	—	1	—	—	—	—	—	—	—	—	—	1	—	1	2
		Not quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Other Organs.	Quiescent ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Not quiescent	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
		Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Peripheral glands.	Quiescent ...	—	—	1	—	1	—	—	—	—	—	—	—	—	1	1	2
		Not quiescent	—	—	3	—	—	—	—	—	—	—	—	—	—	—	3	3
		Died in Institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

PULMONARY — Pulmonary
NON-PULMONARY ---●--- Non-Pulmonary

TUBERCULOSIS NOTIFICATIONS.

—●— Approximate Number of Working Days Lost (Due to Unemployment)

	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935	1936	1937	1938
*	123.288	124.107	116.000	113.000	110.000	107.245	124.997	125.700	122.400	122.900	123.600	123.900	124.000	123.500	124.600	124.700	124.900	124.900	126.100	126.600	126.100	125.700	124.700	123.700	123.000	122.300
†	2·1	1·6	1·5	1·3	1·05	1·5	1·1	1·01	1·1	1·2	1·1	1·09	1·1	1·01	·87	1·05	1·02	·9	·9	·98	·96	·99	·77	·98	·68	·73
‡	1·0	·4	·2	·24	·25	·48	·6	·2	·2	·3	·38	·26	·27	·25	·36	·28	·44	·43	·37	·42	·64	·37	·50	·33	·33	·34

N.B.—The Chart shews only those cases which were notified under the Public Health (Tuberculosis) Regulations, 1930 Cases which came to our notice through the death returns, etc., are not included.

*Estimated Population by Registrar-General.
†Notifications per 1000 population—Pulmonary T.B.
‡ „ „ „ „ —Non-Pulmonary T.B.

260 130 240 120 220 110 200 100 180 90 160 80 140 70 120 60 100 50 80 40 60 30 40 20 20 10 0 0

1900000 1800000 1700000 1600000 1500000 1400000 1300000 1200000 1100000 1000000 900000 800000

TUBERCULOSIS DEATHS.

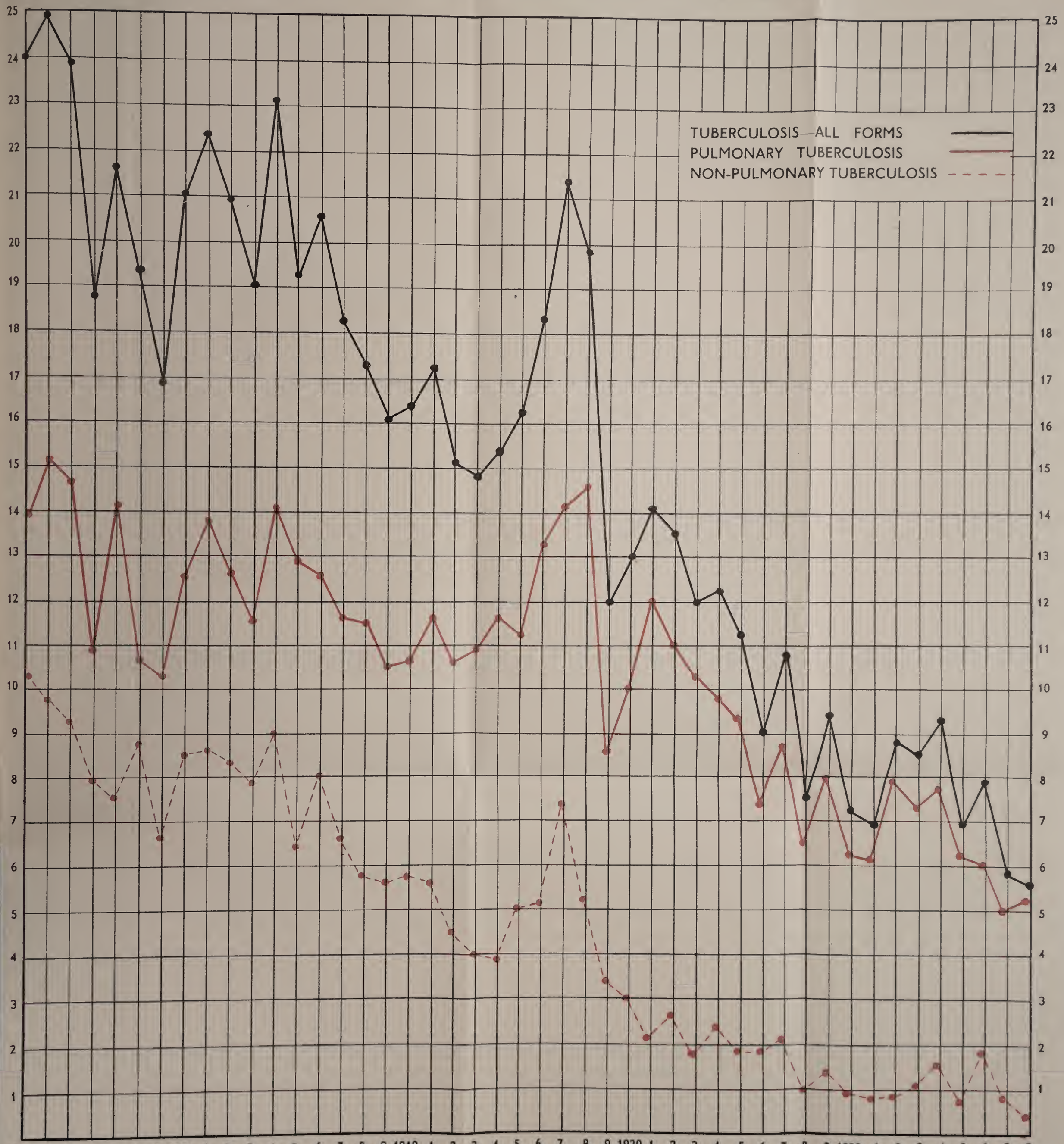
PULMONARY —●— NON-PULMONARY ----●----

165 145 125 105 85 65 45 25 5

155 135 115 95 75 55 35 15

1893 4 5 6 7 8 9 1900 1 2 3 4 5 6 7 8 9 1910 1 2 3 4 5 6 7 8 9 1920 1 2 3 4 5 6 7 8 9 1930 1 2 3 4 5 6 7 8

DEATH RATES FROM TUBERCULOSIS PER 10,000 POPULATION.



CANCER.

Facilities are available at the Norfolk and Norwich Hospital for the operative and radium treatment of cancer. This hospital is the Regional Radium Centre for this district, and has a loan from the Radium Commission of 485 milligrammes of radium. They have a full time Radium Officer. A deep X-ray plant was installed in 1937 and a new X-ray Therapy Department opened. Cancer cases are also admitted to the Norwich Infirmary, and I am informed by the Senior Medical Officer that in the majority of these cases the disease is advanced and inoperable. A number of them are, however, suitable for treatment with radium, and arrangements are made for the transference of these cases to the Norfolk and Norwich Hospital.

The Council has not made any specific financial arrangements with the authorities of the Norfolk and Norwich Hospital for the treatment of cancer patients transferred from the Infirmary.

The tables on pages 127-128 show the ages at which death took place, the sites of the disease, etc.

PROPORTIONAL FREQUENCIES OF ALL SITES OF CANCER IN NORWICH IN 1938 FOR COMPARISON WITH THOSE OF ENGLAND AND WALES, 1935, EXPRESSED AS RATES PER 1000 OF ALL DEATHS FROM CANCER.

Organ.	Males.		Females.	
	England and Wales, 1935.	Norwich, 1938.	England and Wales, 1935.	Norwich, 1938.
Uterus	—	—	133	153
Breast	—	—	201	178
Tongue, etc. ...	97	43	15	—
Vagina	—	—	12	26
Vulva	—		—	
Skin	20	9	14	8
Scrotum	2	—	—	—
Penis	6		—	
Testes	5		—	
Rectum	107	112	59	42
Ovary	—	—	46	34
Prostate	60	52	—	—
Bladder	32	34	12	34
Larynx	29	9	7	25
Thyroid	2	—	6	—
Kidney	12	—	9	—
Stomach	225	198	166	144
Intestine ...	119	146	136	196
Lung	76	34	22	8
Œsophagus ...	58	69	21	25
Gall-bladder ...	9	9	19	8
Pancreas	33	26	27	17
Liver	38	26	36	17
Others	71	233	57	85
	1000	1000	1000	1000

Site of Disease.		0-2	2-5	5-15	15-25	25-35	35-45	45-55	55 65	65-75	75 & over	Total
1. *Alimentary System*—												
Mouth and Tongue	M.	—	—	—	—	—	—	—	2	3	—	5
	F.	—	—	—	—	—	—	—	—	—	—	—
Œsophagus	M.	—	—	—	—	—	—	—	3	4	1	8
	F.	—	—	—	—	—	—	—	1	1	1	3
Stomach	M.	—	—	—	—	—	1	4	8	6	4	23
	F.	—	—	—	1	1	—	1	2	7	5	17
Small Intestine	M.	—	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	1	—	—	1
Peritoneum	M.	—	—	—	—	—	—	—	—	1	—	1
	F.	—	—	—	—	—	—	—	—	—	1	1
Large Intestine	M.	—	—	—	—	—	—	—	5	6	6	17
	F.	—	—	—	—	1	—	1	3	9	8	22
Rectum	M.	—	—	—	—	—	—	1	3	3	6	13
	F.	—	—	—	—	—	1	1	—	3	—	5
Liver	M.	—	—	—	—	—	—	—	2	1	—	3
	F.	—	—	—	—	—	—	—	1	1	—	2
Gall Bladder	M.	—	—	—	—	—	—	—	1	—	—	1
	F.	—	—	—	—	—	—	—	—	—	1	1
Pancreas	M.	—	—	—	—	—	—	1	—	—	2	3
	F.	—	—	—	—	—	—	—	—	—	2	2
TOTAL ...	M.	—	—	—	—	—	1	6	24	24	19	74
	F.	—	—	—	1	2	1	3	8	21	18	54
2. *Respiratory System*—												
Nasal Sinuses, Pharynx ...	M.	—	—	—	—	—	—	—	—	—	2	2
	F.	—	—	—	—	—	—	—	—	—	—	—
Larynx	M.	—	—	—	—	—	—	—	—	—	1	1
	F.	—	—	—	—	—	—	1	—	1	1	3
Trachea and Bronchi ...	M.	—	—	—	—	1	3	2	3	—	—	9
	F.	—	—	—	—	—	—	—	3	—	—	3
Lungs	M.	—	—	—	—	—	—	1	2	—	1	4
	F.	—	—	—	—	—	—	—	—	1	—	1
Mediastinum	M.	—	—	—	—	—	—	—	1	1	—	2
	F.	—	—	—	—	—	—	1	—	—	—	1
TOTAL ...	M.	—	—	—	—	1	3	3	6	1	4	18
	F.	—	—	—	—	—	—	2	3	2	1	8

Site of Disease.		0-2	2-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	75 & over	Total
3. *Genito-Urinary System*—												
Kidney	M.	—	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—	—
Bladder and Urethra ...	M.	—	—	—	—	—	—	—	2	1	1	4
	F.	—	—	—	—	—	—	—	1	2	1	4
Prostate	M.	—	—	—	—	—	—	1	1	2	2	6
Penis and Testes	M.	—	—	—	—	—	—	—	—	—	—	—
Ovary	F.	—	—	—	—	—	1	—	1	—	2	4
Uterus (body)	F.	—	—	—	—	—	—	—	3	2	—	5
Uterus (cervix)	F.	—	—	—	—	—	1	2	6	1	3	13
Vulva and Vagina	F.	—	—	—	—	—	—	1	—	2	—	3
TOTAL ...	M.	—	—	—	—	—	—	1	3	3	3	10
	F.	—	—	—	—	—	2	3	11	7	6	29
4. *Central Nervous System*—												
Brain	M.	—	—	—	—	—	—	2	—	—	—	2
	F.	—	—	—	—	—	—	—	—	—	—	—
Spinal Cord	M.	—	—	—	—	—	—	—	—	—	—	—
	F.	—	—	—	—	—	—	—	—	—	—	—
TOTAL ...	M.	—	—	—	—	—	—	2	—	—	—	2
	F.	—	—	—	—	—	—	—	—	—	—	—
5. *Other Sites*—												
Bones	M.	—	—	—	—	—	1	—	2	—	1	4
	F.	—	—	—	—	—	—	—	1	1	—	2
Skin	M.	—	—	—	—	—	—	—	—	—	1	1
	F.	—	—	—	—	—	—	—	—	—	1	1
Breast	F.	—	—	—	—	—	3	6	4	5	3	21
Lymphatic System (Lymphosarcoma)	M.	—	—	—	—	—	—	—	1	—	—	1
	F.	—	—	—	—	—	—	—	—	—	—	—
Unclassified	M.	—	—	—	—	—	—	3	—	2	1	6
	F.	—	—	—	—	—	—	1	—	2	—	3
GRAND TOTAL ...	M.	—	—	—	—	1	5	15	36	30	29	116
	F.	—	—	-	1	2	6	15	27	38	29	118

WELFARE OF THE BLIND

BLIND PERSONS ACTS, 1920 and 1938.

REPORT FOR YEAR ENDED 31st MARCH, 1939.

MEMBERS OF THE HEALTH (SUB) COMMITTEE *RE* BLIND PERSONS WELFARE.

Chairman - Alderman MISS M. M. CLARKSON, C.B.E., J.P.

Vice-Chairman - Councillor R. P. BRAUND.

Members :—

Councillors—

Mrs. E. K. Fugill

Rev. H. Pitts

Mrs. A. M. Witard

R. C. Fanthorpe, Esq., *Superintendent and Secretary of the Norwich Institution for the Blind.*

Messrs. H. Fuller and J. Brighty, *Representatives of Blind Persons.*

Blind Persons' Acts, 1920 and 1938.

The Blind Persons' Act, 1938, came into operation on 1st April, 1938, under which the Council made Regulations for the provision of Domiciliary Assistance to Unemployable and other necessitous Blind Persons. Some slight amendments to these Regulations became necessary, but, on the whole, the arrangements have functioned very satisfactorily.

Statistics.

No. of Blind persons on Register on 1st April, 1938 ...	399
,, ,, ,, Registered during the year ...	38
,, ,, ,, removed from the Register ...	41
,, ,, ,, on Register on 31st March, 1939 ...	*396

*This number consists of 177 males and 219 females.

	Males.	Females.	Total.
In Norwich Institution for the Blind (Home Department) ...	2	4	6
In the Public Assistance Institution	11	9	20
In Mental Institutions	4	4	8
At the East Anglian School for Blind and Deaf Children ...	2	3	5
Under Training	6	3	9
Unemployed	30	9	39
Other Registered Cases	122	187	309
Totals ...	177	219	396

The number of persons on the observation register on the 31st March, 1939, was 208.

60 new cases were examined, 29 of whom were certified "Blind"; 29 cases on the observation register were re-examined, 4 of whom were certified "Blind"; 5 blind persons moved into the City from other districts, making a total of 38 persons registered during the year. 6 blind persons were re-examined, 4 of whom were de-certified; 34 died and 3 removed to other districts.

Employment.

The number of blind persons employed was 39—30 males and 9 females. The classes of employment were as follows:—

	Male.	Female.
Basket Work	9	—
Boot Repairing	1	—
Brush Makers	5	—
Carpenter	1	—
Home Teacher	1	—
Massage	1	1
Matmakers	8	—
Piano Tuners	3	—
Solicitor	1	—
Machine Knitters	—	6
Music Teachers	—	2
	30	9

1 piano tuner also does some concert work and another does a little wireless repairing and accumulator charging; 1 matmaker also does boot repairing.

Of these persons, 19 males and 6 females were employed at the Norwich Institution for the Blind; 5 males were working at home under the supervision of St. Dunstan's; and 6 males and 3 females were employed elsewhere.

Training.

The number of persons in training was 9—6 males and 3 females—all being under training at the Norwich Institution for the Blind.

5 children—2 boys and 3 girls—are being educated and maintained at the East Anglian School for Blind and Deaf Children at Gorleston.

Finance.

Under Section 102 (1) of the Local Government Act, 1929, the Ministry of Health set out statements of certain fixed sums which are to be paid by the Local Authority to Voluntary Associations for the Blind, in place of the grant formerly paid by the Ministry of Health to these Associations direct, and the contributions made by Local Authorities. Under this scheme fixed annual sums have been agreed upon, which are payable to Associations as follows:—

	£	s.	d.
Southern Regional Association for the Blind...	47	0	0
National Library for the Blind	19	0	0
National Institute for the Blind	61	0	0

The annual sum of £1080 has been fixed as the amount payable to the Norwich Institution for the Blind, but this amount is liable to vary in accordance with the number of blind persons attached to that Institution who are registered as Norwich cases. This sum is based upon the payment of the following annual sums per person, according to the department of the Institution to which they are allocated:—

	£	s.	d.
Journeymen	65	0	0
Home Inmates—			
Registered Norwich cases who are in receipt of a Blind Pension	49	8	0
Registered Norwich cases who are not eligible for a Blind Pension ...	56	16	0
Persons in the Home Department previous to 1920, but who came from other areas	13	0	0

The following sums were actually paid during the year to these Associations or Institutions:—

	£	s.	d.
Norwich Institution for the Blind	1934	3	6
Southern Regional Association for the Blind...	47	0	0
National Library for the Blind	19	0	0
National Institute for the Blind	61	0	0
Total ...	£2061	3	6

Under Section 3 of the Blind Persons' Act, 1938, which lays down the conditions under which one Council may recover from another the cost of assistance granted to a blind person, amounts were received as under :—

	£	s.	d.
From the Norfolk County Council	50	5	9
From the Great Yarmouth Borough Council ...	9	12	6
Amounts paid to other Authorities were :—			
Kent County Council	5	2	0

Quarterly inspections are made of the Norwich Institution for the Blind by one of the Medical Officers of the Public Health Department, and reports sent to certain other Local Authorities who have accepted financial responsibility for trainees, etc.

Relief was granted to unemployable and necessitous blind persons and members of their households who are dependent upon them in accordance with the Council's Regulations, and during the year £11,681 18s. 11d. was paid to a weekly average number of 283 persons. On the 31st March, 1939, 287 blind persons were in receipt of allowances.

The Home Teachers paid 4713 visits during the year. They instructed and assisted those persons desirous and capable of receiving instruction in Handicraft, Braille and Moon, whilst for others the sighted Home Teacher assisted them with their correspondence and private business matters. The latter is also responsible for investigations into the financial circumstances of Blind Persons who are assisted by the Council. These enquiries are now made at intervals of not less than three months instead of at periods of six months as heretofore.

Home Teachers.

Lessons in Handicrafts, Braille and Moon have been given by the Home Teachers at the homes of blind persons as under :—

Braille	64	Brought forward...	159
Moon	50	Deaf-Blind or Manual Alphabet ...	10
Chair Caning ...	2		
Straw Baskets ...	43	Total ...	169
Carried forward ...	159		

The Home Teachers conducted an informal class in Handicrafts at Churchman House on 1 half-day each week. About

9 persons attended these classes regularly. Lessons were given as under :—

Seagrass	50	Brought forward...	183
Chair Caning ...	55	Knitting	80
Pulp Cane ...	78	Straw Baskets ...	90
Carried forward ...	183	Total ...	353

A Talking Book Machine Class is held at the Public Health Department on Thursday afternoons each week, at which an average of 8 persons attended to hear book records supplied by the National Institute for the Blind.

Social Arrangements.

Monthly "socials" were held throughout the year with the exception of August, and were much appreciated. The average attendance at each "social" was 74 blind persons, and 26 persons acting as guides. At these "socials" we are very much indebted to the Concert Parties and other artists who gave their time for the enjoyment of the blind people, to the voluntary helpers, and some members of the Office Staff.

£55 4s. 11d. has been very generously provided by the Committee of the Norwich Institution for the Blind for the social side of the welfare of blind persons.

On Thursday, the 30th June, 1938, the Norwich Rotary Club again arranged an annual outing for the blind. 232 blind persons were conveyed by private cars and buses to Yarmouth, where tea and entertainment were provided. The outing was greatly enjoyed by all.

Through the kindness of the Comrades of the Royal Air Force Association, 15 blind persons were taken for air flights from the Aerodrome at Mousehold on 5th July, and provided with supper.

Wireless Sets, etc.

Since the inauguration of the British Wireless for the Blind Fund, 23 one-valve, 106 two-valve, 45 three-valve wireless sets, and 123 Relays have been provided for blind persons in Norwich. Of this number, 3 one-valve, 28 two-valve, 14 three-valve sets, and 123 Relays are at present in use. Some of the older sets, for which there have been no further use, have been returned.

2 all-mains three-valve wireless sets and 1 Relay have been presented to the Committee privately; these have been allocated for the use of deserving blind persons.

The Rotarians are maintaining a wireless centre for the blind at 63a, Pottergate. The use of this centre is much appreciated by several blind persons.

Blind persons are responsible for the upkeep of the sets loaned to them, and to assist them in this matter, batteries and other accessories can be purchased by them, through the Health Department, from the British Wireless for the Blind Fund, at reduced prices. Arrangements exist whereby the Council purchase a battery from the Fund for a blind person on request, and the person is allowed to pay the cost to the Council by weekly instalments of at least 1/-. In some cases batteries are provided free of charge.

The Southern Regional Association for the Blind continue to make grants for use in connection with the maintenance of wireless sets and Relays.

Dentures, etc.

The Blind Persons Welfare Committee has ceased to supply dentures, etc., this work having been transferred to the Public Assistance Committee.

The Committee has provided a bath chair, which is loaned to those blind persons who are unable to walk, in order that their relatives and friends can take them out.

Prevention of Blindness.

An analysis of the records of all the registered cases shows the causes of blindness as under :—

Choroiditis	19
Glaucoma	24
Optic Atrophy	14
Venereal Diseases	57
Trauma	18
Myopia	51
Cataract	68
Hypermetropia	3
Iritis and Iridocyclitis	15
Congenital	29
Retinitis	2
Circulatory	5
Senility	23
Infective Diseases	8
Diabetes	2
Ill-defined or unknown	58
Total ...	396

As there has been no evidence during the year of any difficulty in obtaining medical treatment which would prevent blindness, it was not considered necessary to take any action under Section 176 of the Public Health Act, 1936.

Every effort is, however, made to prevent blindness by securing treatment for gonorrhœal ophthalmia, syphilis and tuberculosis; by increasing the attention to eyes through the Maternity and Child Welfare and School Medical Services; and by improving the attention to the nutrition and living of the people as far as possible. It should be borne in mind, however, that this latter item will lengthen and is lengthening the lives of blind persons as well as those of sighted people, and therefore this lengthening of life tends to keep up the numbers on the Register.

SCHOOL MEDICAL SERVICE



Norwich Education Authority.

ANNUAL REPORT OF THE SCHOOL MEDICAL OFFICER.

My Lord Mayor, Ladies and Gentlemen,

I have the honour to submit the annual report of the School Medical Service for the year ending 31st December, 1938. As in previous years, the arrangement is in accordance with the suggestions of the Board of Education.

Dr. Riddel, the School Medical Officer in charge of the School Medical work, was, unfortunately, away ill for part of the school medical year. We were able to secure locumtenens Medical Officers to cover most of this period but, in spite of their goodwill, temporary staff is never quite the same as the permanent staff, and we were very glad to welcome Dr. Riddel back after his long illness. I have to say that he has taken a very large share in the production of this report.

Nutrition is and has for a long time been a very prominent matter in the medical and lay Press, and is also the subject of many speeches and much discussion in Committees. I cannot think that we are badly off in this respect in Norwich, but it is very difficult to get any satisfactory means of comparison with other parts of the country. There is still a tendency to take into account height and weight or the height-weight ratio. These are obviously factors of interest and importance, but a factor which is not generally taken into account is the racial or family tendency. Really, in order to assess the nutrition of a child satisfactorily, one ought to see both parents and even to go

further back in the child's family history, as there is no reasonable doubt that the build of a person is much influenced by his or her heredity. The height-weight ratio of, say, a racehorse is entirely different from the height-weight ratio of a heavy draft horse, and yet both may be perfectly well nourished and, with such an obvious factor in mind, the height-weight ratio is obviously entirely inaccurate as a measure of nutrition. Some means of co-ordinating the height-weight ratio with the racial characteristics or heredity of a child might be of some value, but in this respect we in this island are such a mixture of races that this is almost impossible. However, about 1926, the Board of Education did make certain investigations amongst school children with regard to this racial question, and again in 1934 a Medical Officer from the Board visited on a national assessment of nutrition, and it would be of interest to know whether any correlation of the height-weight ratio and the racial tendencies discovered in those two investigations exists.

Speaking of nutrition, it is well to point out that there appears to be no power to grant, through the Infant Welfare Centres, milk, etc., to any child attending school, including nursery schools or classes.

In the appropriate part of the report it can be seen that a great change has come over the mental deficiency part of the work, which change was overdue and is welcome. When considering the question of intelligence and mentality of the Elementary School child, it is as well to remember that the Elementary Schools are now subject to two "creamings" of intelligence—

(*a*) for Secondary Schools at 11+ years, and

(*b*) for the Junior Art, Commercial and Technical Schools at 13+ years,

so that those leaving school at 14 years of age cannot be considered fair representations of the average intelligence of the school population. I understand that approximately 15 per cent. of each age group go to the Secondary Schools, and a much smaller percentage, perhaps 2 per cent., are later selected for the Junior Art, Commercial and Technical Schools. Thus, somewhere in the neighbourhood of 17 per cent. of the brightest scholars have previously been removed from the school-leaving children.

The School Dental Officer still has great cause to complain of the parents and children not keeping their dental appointments. This causes a great waste of time, and is a great inconvenience

to the dentists and to other parents and children. One cannot keep two people hanging about doing nothing because someone else has not turned up if this can be avoided, and the failure to keep an appointment may throw the whole of the arrangements out of gear. The forceful endeavour to establish an appointment system has not been working for very long yet and the arrangements occasionally break down. It is to be hoped that this improves in due course. On the other hand, with such a system in force, it is obviously difficult to "pack in" anything much in the way of emergency work.

I would like to take this opportunity of thanking the private practitioners in the city who have so willingly given me information about children under their care who are absent from school.

My thanks are again, as always, due to the members of the Education Committee for their support, to the teachers, the staff of the Education Department, and my own Staff, for the assistance given so readily throughout the year.

I have the honour to be,

Your faithful Servant,

V. F. SOOTHILL.

21st March, 1939.

(1) **Staff.** See pages 10-12.

(2) **Co-ordination.** The whole of the Public Health Staff is co-ordinated in and directed from the office of the Medical Officer of Health.

The arrangements previously existing for many years have not been altered.

One session is held weekly at the Tuberculosis Clinic for school children who are suspected to be suffering from tuberculosis, or who are contacts of such cases.

The School Nurses also act as Health Visitors; the visitation of mothers and infants is carried out by these Officers, and they staff the Infant Welfare Centres.

The treatment of infants at special clinics, e.g., Eye Clinics, etc., is available as before.

(3) **School Hygiene.** Since 1926, when the migration of the population from the centre of the city to the outskirts commenced, there has been a steady flow to the environs, with the consequent provision of new and up-to-date schools, with less inadequate playgrounds and fields. Up to the end of the year, 16 new schools accommodating 5655 children, have been built on the new estates, and almost one-third of the elementary school children in the city now attend these schools.

Several of the older schools have been modernised and more will be done. There still remains a few schools, badly situated and cramped, but their closure is simply a matter of time. During the September crisis, 6 schools were structurally altered to make provision for first aid posts, and these alterations remain, thus reducing the accommodation so that, in the case of Colman Road Infants', 50 odd children were transferred to the Dowson School, and a number of Angel Road senior boys to Bull Close School.

Most of the old schools which catered for the slum areas have been closed, and below is given a list of the schools closed and of the new schools built since 1926.

Schools Closed since 1926.	Date Closed.
St. Peter Parmentergate Infants'	31.3.26
Quay Side	31.7.27
Eaton	30.3.28
St. John de Sepulchre	31.7.30
St. Martin-at-Palace	31.7.30
St. Miles	31.7.30
Heigham Street Boys'	31.8.30
Heigham Street Girls'	31.8.30

Schools Closed since 1926.	Date Closed.
St. Saviour's	23.12.31
St. Peter Parmentergate Boys'	28.7.32
St. Paul's	30.3.33
Pottergate	21.12.34
St. Peter Mancroft	1.8.35
St. Stephen's	1.8.35
St. Paul's and Old Meeting House	31.3.36
*George White Infants'	15.10.36
*Crooks Place Senior Girls'...	21.12.36
Surrey Road (Senior Boys', Primary Boys' and Infants')	24.3.37
*Stuart Central *Crome Central	29.7.37
*Angel Road Primary Boys'	28.7.38
*Bull Close Senior Boys'	28.7.38

*These school buildings are still being used by other school departments under the re-organisation scheme.

Schools Opened since 1926.	Date Opened.
Norman (Mile Cross) Infants'	26.4.26
Dowson Infants'	6.12.26
Colman Road Primary Mixed	11.1.27
Dowson Primary Mixed	23.1.28
Norman Primary Mixed	8.4.29
Colman Road Senior Girls'	2.9.30
Dowson Senior Girls'	6.1.31
Norman Senior Boys'	1.4.31
Cavell Infants'	1.9.31
Cavell Primary Mixed	1.1.32
Wellesley Infants'	21.11.32
Catton Grove Primary and Infants' ...	8.1.35
Stuart Senior Girls'	1.9.35
Mousehold Avenue Infants'	19.10.36
Crome Senior Boys'	1.4.37
Catton Grove Infants'	30.8.38

(4) **Medical Inspection.** There is an Open Air School, adjoining which is the Special School for mental defectives, and 28 Elementary Schools with 57 Departments—20 Infants, 1 Primary Girls and Infants, 2 Primary Mixed and Infants, 12 Primary Mixed, 3 Primary Boys, 3 Primary Girls, 8 Senior Girls, 6 Senior Boys, 1 Boys and 1 Girls and Juniors. The total number of children attending these schools on 22nd December was 15,174.

There are 2 Secondary Schools, 1 Junior Technical School, 1 Junior Art School and 1 Junior Commercial School, with 1204, 154, 55, and 120 scholars respectively.

The following is a list of the departments and schools as on the 31st December, 1938 :—

Angel Road	Senior Boys'
,, ,,	Infants'
Avenue Road	Senior Boys'
,, ,,	Primary Boys'
,, ,,	Infants'
Bignold	Primary Mixed
,,	Infants'
Bull Close	Primary Mixed
,, ,,	Infants'
Catton Grove	Primary Mixed
,, ,,	Infants'
Cavell	Primary Mixed
,,	Infants'
College Practising	Primary Girls'
Colman	Senior Girls'
Colman Road	Primary Mixed
,, ,,	Infants'
Crome	Senior Boys'
Dowson	Senior Girls'
,,	Primary Mixed
,,	Infants'
George White	Senior Girls'
,, ,,	Primary Mixed
Heigham St.	Primary Mixed
,, ,,	Infants'
Horns Lane	Primary Mixed
,, ,,	Infants'
Lakenham	Senior Girls'
	Primary and
,,	Infants'
Model	Senior Girls'
Mousehold Avenue	Infants'
Nelson Street	Senior Boys'
,, ,,	Primary Boys'
,, ,,	Infants'
Norman	Senior Boys'
,,	Primary Mixed
,,	Infants'
Philadelphia	Primary Mixed and Infants'
St. Aug'tine's	Senior Girls'
,, ,,	Primary Mixed
,, ,,	Infants'
St. Giles'	Primary Girls' and Infants'
St. Mark's	Senior Boys'
,, ,,	Primary Mixed
,, ,,	Infants'
Sprowston	Infants' (City Scholars)
Stuart	Senior Girls'
Thorpe Hamlet	Primary Boys'
,, ,,	Primary Girls'
,, ,,	Infants'
Wellesley	Infants'
Wensum View	Senior Girls'
,, ,,	Primary Girls'
,, ,,	Infants'
Willow Lane	Boys'
,, ,,	Girls' & Juniors
,, ,,	Infants'
Colman Road Open Air School	

Secondary.

Blyth Secondary
City of Norwich
Technical College
Junior Art
Junior Commercial

The arrangements for notifying Head Teachers and parents of School Medical Inspections and the assistance given by the School Nurses remain the same as in previous years. At some schools the examinations have to be held under trying conditions, due to lack of adequate rooms, etc. It is a pleasure to put on record the valuable co-operation of the Head Teachers in the city.

In the Report for 1935 it was mentioned that the Age Groups for the routine examination of school children had been revised, the revision having been approved of by the Board. The Routine Medical Inspections of children are now at the following ages :— Entrants (Board's first Age Group), 8 years (Board's second Age Group), 11 years (corresponding to the Board's third Age Group of 12 years) and 2 other Age Groups are still included, i.e., 6 years and 13 years, instead of 10 years and 13 years.

The numbers of children who were examined at the Elementary Schools during the year in the various groups were as follows :—

	Boys.	Girls.	Totals.
Entrants	970	891	1861
Intermediate (8 years)	717	730	1447
Leavers	607	668	1275
Other Groups : 6 years	590	560	1150
13-14 years ...	638	721	1359
Miscellaneous ...	123	153	276
TOTALS	3645	3723	7368

(5) **Findings of Medical Inspection.** Facts disclosed by Medical Inspection.

ELEMENTARY SCHOOLS.

Defect or Disease.	Routine Inspections.	"Specials" at School or Clinic.	Total Defects.	Referred for Treatment.
Uncleanliness :				
Head	7	329	336	336
Body	—	—	—	—
Minor Injuries, Septic Sores, etc.	10	1380	1390	1387
Tonsils and Adenoids ...	273	317	590	243
Other Diseases of the Nose and Throat	73	613	686	619
Pulmonary Tuberculosis :				
Definite	—	1	1	1
Suspected	—	—	—	—
Non-Pulmonary Tuberculosis	1	10	11	11
Skin Diseases	63	881	944	913

ELEMENTARY SCHOOLS—*continued.*

Defect or Disease.	Routine Inspections.	"Specials" at School or Clinic.	Total Defects.	Referred for Treatment.
External Eye Diseases ...	17	327	344	333
Vision and Squint	305	479	784	742
Ear Disease and Hearing ...	54	326	380	337
Dental Diseases	41	234	275	226
Crippling Defects, Deformities, etc.	313	174	487	395
Malnutrition	572	627	1199	1144
Enlarged Cervical Glands (Non-Tuberculous) ...	26	188	214	135
Defective Speech	24	30	54	29
Heart and Circulatory Diseases	188	201	389	308
Bronchitis	49	78	127	104
Other Non-Tuberculous Diseases of the Lungs ...	25	84	109	85
Diseases of the Nervous System	50	146	196	157
Other Defects and Diseases ...	247	1577	1824	1624

MALNUTRITION. The following paragraphs give Dr. Riddel's views on this subject:—

"In recent years, the subject of nutrition has been very much in the minds of the public, and the School Medical staff are constantly on the watch for any deviation from the normal. "Nutrition is a fundamental function on which the condition of the body, that is to say, health, depends. It is not merely food. Food is the instrument of nourishment; nutrition is the act of using it." (McCarrison.)

The malnourished child may not necessarily lack food either in quantity or quality, although insufficient food is one of the causes of malnutrition. The malnourished child may lack fresh air, or rest, or it may have some chronic illness—such as rheumatism, or it may have a hereditary weakness of constitution. Cases due to lack of sufficient food are not so numerous as one would expect, as is proved from an examination of the records of children admitted to the Open Air School for malnutrition. Despite three good meals, open air and rest, many of them make but slow progress in gains of height and weight, although their colour and vitality improve. In exceptional cases, admission is followed by an immediate and rapid gain in weight for the first few weeks, followed by a normal gain—in these few cases the cause of the malnutrition is undoubtedly lack of food. This is proved by the fact that soon after being discharged as cured, these cases were found to have lost weight and vitality

and had to be re-admitted, the same immediate gain occurring with rapid return to normal health. In Norwich, rickets is the cause of many cases of malnutrition.

Nutrition consists in the general well-being and harmonious functioning of the whole body, whilst malnutrition is the opposite. There is no standard (e.g., height, weight in relation to age, etc.) for assessing malnutrition, except the clinical one, and this may thus necessarily vary with individual medical officers, but surveying the results obtained in the whole country, the standard varies much less than one would expect.

With the clinical standard, which was laid down by the Board of Education in 1934, the main issue is to estimate the general well-being of the child—general appearance, colour, posture, the tone of the muscles, the amount of subcutaneous fat and the presence or absence of anæmia, taking into consideration as well the ratio of height, weight, age and sex—so that the assessment is made by a general impression and not by any single factor, nor by a measurable objective standard. The classification of children into four nutritional groups has been carried out since 1935, the four groups being :

A—Excellent.
B—Normal.
C—Slightly subnormal.
D—Bad.

In 1935, also, the Milk Marketing Board Scheme, which came into effect in October, 1934, for supplying school children daily with 1/3rd pint of milk in schools for one halfpenny, had been in force for a whole year, this being the largest experiment in supplementary school feeding the world has seen, and in the same year, the Board of Education issued Circular 1443 which stated that an authority should not wait for application by parents for extra-nourishment, but should itself take steps to ascertain such children by inviting reports from the School Medical or Public Health Staff, from teachers, school nurses, school attendance officers and others in regular contact with the children from day to day, and that, if in the opinion of the authority's Medical Officers, who should examine all cases, these children showed any symptoms, however slight, of subnormal nutrition, they were eligible for extra nourishment.

Routine medical inspection takes place at such infrequent intervals that it alone is not sufficient to ascertain the malnourished children in the area. Teachers are encouraged to submit those children who, in their opinion, are in need of nourishment and do so in large numbers, especially since they have been

weighing and measuring the children each term. 771 children were submitted by them in July as in need of nourishment. In addition, surveys of certain schools and areas have been undertaken by the medical staff.

The number of elementary school (exclusive of the Open Air School) children on meals, which had been more or less constant round about 250 since 1935 jumped to 543 in 1938, whilst the number on milk meals, which was 583 in 1935, increased to 1827 in 1936 and to 2536 in 1938—one pint of milk being given daily ($\frac{1}{2}$-pint in morning and $\frac{1}{2}$-pint in afternoon). The results of the nutritional assessment are clearly shown for the past four years in the tables below.

I.—Classification of the nutrition of Elementary School Children inspected during the year in the Routine Age Groups.

Age-groups.	No. of Children Inspected.	A. (Excellent.)		B. (Normal.)		C. (Slightly subnormal.)		D. (Bad.)	
		No.	%	No.	%	No.	%	No.	%
Entrants ...	1861	192	10.3	1470	79.0	198	10.6	1	0.1
Second Age-group	1447	166	11.5	1034	71.5	245	16.9	2	0.1
Third Age-group	1275	172	13.5	877	68.8	225	17.6	1	0 1
Other Routine Inspections ...	2785	407	14.6	2014	72.3	362	13.0	2	0.1
TOTAL ...	7368	937	12.7	5395	73.2	1030	14.0	6	0.1

II.—Tables showing percentage of malnourished children for the years 1935-1938 from the assessment of nutrition of children seen in Routine Medical Inspections.

(*a*) For Norwich.

Age Groups	1935		1936		1937		1938	
	C Slightly Sub-normal	D Bad	C Slightly Sub-normal	D Bad	C Slightly Sub-normal	D Bad	C Slightly Sub-normal	D Bad
Entrants ...	13.2	0.3	13.4	0.1	13 4	0 3	10 6	0.1
2nd Age Group	23.4	1.0	21.5	0.4	20.6	0.4	16.9	0.1
3rd Age Group	19.5	1.1	19 4	0.4	19 3	0.2	17 6	0.1
Other Routine Groups ...	17.5	0.6	16.6	0.4	16 8	0.2	13.0	0.1
TOTAL ...	17.8	0.7	17.4	0.3	17.2	0.3	14 0	0.1

(*b*) For England and Wales (Years 1935-1937).

Age Groups	1935		1936		1937	
	C Slightly Sub-normal	D Bad	C Slightly Sub-normal	D Bad	C Slightly Sub-normal	D Bad
Entrants	10·1	0 7	10 3	0 7	10·2	0 6
2nd Age Group ...	12·2	0·9	12·2	0·8	12 3	0·7
3rd Age Group ...	10·0	0·7	9·6	0 6	9·9	0 5
Other Routine Groups ...	8·5	0·6	8·6	0·6	8·2	0·3
TOTAL	10·6	0·7	10·5	0·7	10·6	0·6

It will be observed that the nutrition of infants is the best in the group and that of the second age group the worst. It will also be observed that there is a steady improvement in nutrition during the past four years and that there are few cases of severe malnutrition. The figures for the whole country are given in table II(b), and show that while Norwich shows an average of 18·5% of malnutrition in 1935 falling to 14·1% in 1938, the figure for the whole country has remained almost constant at 11·2% (1938 figure not available). It will also be observed that the percentage of badly malnourished children in Norwich is below that of the rest of the country and has steadily fallen. The apparent increase in Norwich is only in the group classed as slightly malnourished.

Whilst the percentage of slightly malnourished children is much higher than that of England and Wales as a whole it does not necessarily follow that there is more malnutrition in Norwich. In fact, it is almost certain that the increase is due to a more liberal interpretation of the Board of Education circular 1443, which permits an authority, on the advice of its medical staff, to give extra nourishment to any children who show any symptoms, however slight, of subnormal nutrition.

With regard to the secondary schools, it is interesting to note that the percentage of malnutrition was 12·9 in 1935 and 14·7 in 1938.

It is interesting to note that the transfer of children from a slum to an excellent environment on the outskirts of the city does not necessarily raise the nutritional level. In fact, the reverse may be the case, as the income of the parent remains the same while there are new and heavy transport charges for both parents, capital to be expended on floor coverings and for additional furnishings, so that there must be a smaller sum available for both food and clothing."

Skin Diseases. Contagious skin disease shows a satisfactory fall in 1938. The number of cases of scabies found was 22, compared with 21 in 1937. The number of cases of impetigo (232) compares with 388 in 1937, but the number of other skin diseases has somewhat increased at 650 compared with 596 in 1937. Minor injuries stand at 562 as against 545 in 1937, whilst septic sores at 825 show an appreciable decrease compared with 1114 cases in 1937.

Ringworm. This is now of little importance. No case of ringworm of the scalp was on the books at the end of the year.

Eye Diseases. Blepharitis is about the same as last year—100 compared with 105. A sharp rise in the number of conjunctivitis, 112 as against 57, was due to an outburst in the spring. There is little change in the number of cases of defective eyesight and squint, 742 as compared with 773 in 1937.

Nose and Throat Diseases. The Chief Medical Officer of the Board of Education again draws attention, in his report for 1937, to what in his opinion is unnecessary removal of tonsils throughout the country. The number of cases (elementary) operated on in Norwich in 1938 was 217, which gives a percentage of 1·6 of the annual average attendance, which is fairly low. In quite a number of cases where the medical officer has marked the card for observation and not for treatment, the parent has not been satisfied that operative removal was not advised and has had the tonsils removed either at the hospital or by her own doctor. This applies more particularly to the parents of only children.

The table below shows the number of children who had tonsils, tonsils and adenoids, and adenoids only, removed, each year during the past 12 years.

Year.	Total operations for tonsils, tonsils and adenoids and adenoids, by :— Local Authority.	Private arrangement.	Total.
1927	70	310	380
1928	209	143	352
1929	187	143	330
1930	224	84	308
1931	282	90	372
1932	184	64	248
1933	194	57	251
1934	175	61	236
1935	240	55	295
1936	190	21	211
1937	191	11	202
1938	208	9	217

Tuberculosis. One pulmonary case in 1938 compares with 2 in 1937, while 11 non-pulmonary cases compare with 12 in the previous year.

Ear Disease and Hearing. 34 cases of defective hearing were found as compared with 87 in 1937—the difference being attributable to the use of the audiometer in the previous year. The number of discharging ears at 177 compares with 165 in 1937.

Orthopædic Defects show a slight rise—395 as compared with 338 in 1937. This is due, not to a real increase, but to more attention being given to the slighter defects by medical officers in view of the facilities for treatment provided by the Orthopædic Scheme (see pages 164-168).

Heart Disease and Rheumatism. Heart and circulatory diseases are little changed at 308 compared with 311.

Rheumatism (including chorea) at 52 shows a decrease as compared with 66 in 1937.

Other defects and diseases give a figure of 1624 as compared with 1481 in 1937. Both these figures include the number of rheumatism cases (not chorea).

(6) **Following Up.** The following up arrangements by the School Nurses, etc., have not been altered during the year.

During the year, 20 cases were referred by the Enquiry and Welfare Officers or by myself to the Inspector for the Prevention of Cruelty to Children for the undermentioned reasons:—

Children with defective vision or cases in which parents refused to obtain spectacles	6
Cases of neglect	14
TOTAL ...	20

During the year the School Nurses paid 1898 visits to the homes of parents whose children had been advised to have medical treatment.

(7) **Arrangements for Treatment.** Minor Ailments are treated at Churchman House each morning, and clinics are also held there on Monday, Wednesday and Friday afternoons. At these clinics, "Special" cases, e.g., malnutrition cases, etc., are seen.

The Ophthalmic Surgeon usually attended on 3 mornings each week.

There is also a Special Clinic for children on Saturday mornings, at which, children requiring special consideration are seen. The arrangements for operative treatment for tonsils and adenoids at the Hospitals are unchanged. Dental Clinics are conducted daily at Churchman House. The Ear Clinic arrangements, which were extended in 1936, have been continued throughout the year (see pages 156-158).

The Orthopædic Scheme, which commenced in June, 1936, has been continued, and children suffering from crippling defects and deformities are referred to the Orthopædic Surgeon, who advises as to necessary treatment and instructs the Orthopædic Masseuse accordingly. The Orthopædic Surgeon, who is on the Honorary Staff of the Norfolk and Norwich and Jenny Lind Hospitals, also carries out operative treatment at these hospitals, where necessary. A few cases have been sent to Melton Lodge. A few other cases of children suffering from crippling defects are still sent to the Royal National Orthopædic Hospital, London, as they were under treatment there before the local scheme started.

Parents are asked to contribute according to their financial circumstances, when surgical boots, etc., are recommended and when children are admitted as In-patients to the hospitals. The Health Committee has accepted responsibility for the treatment of a few special cases when they cease to come under the care of the Education Committee (see pages 164-168).

The Medical Inspectors, on revisiting the schools, are specially directed to have children, who previously had been referred for treatment, brought forward for reinspection so that the results of treatment can be observed and recorded.

The Invalid Children's Aid Association continues to do valuable work in connection with the provision of treatment for children suffering from Anæmia, Debility, etc., mainly by sending these children to seaside Convalescent Homes for a period of 2—3 weeks.

In June, the Association was relieved of all work in connection with the supply of surgical boots and instruments for crippling defects. This action was taken to avoid the inevitable delay which occurred through the transference of instructions between my office, the Education Department and the Association.

During the year 12 children of school age (11 Elementary and 1 Secondary) were provided with surgical boots and appliances for Talipes, Infantile Paralysis, Club Feet, etc., through

the Association. 505 (502 Elementary and 3 Secondary) cases of school age were provided with Malt and Oil, Virol, etc., either free or at part or cost price. Arrangements were made for 80 children of school age (79 Elementary and 1 Secondary) to be admitted to convalescent homes for Anæmia, Debility, etc., and for 16 Elementary School children to stay in the country. A contribution of £25 per annum is made by the Education Authority to the Association.

The following are the results obtained by the end of 1938 :—

Defect or Disease	Referred for Treatment during 1938 and Treated	Cured	Referred for Treatment previously but treated during 1938	Cured	Total Defects Treated	Total Defects Cured
Minor Injuries, Septic Sores, etc.	1383	1312	57	57	1440	1369
Tonsils and Adenoids ...	183	183	34	34	217	217
Other Diseases of the Nose and Throat ...	590	490	65	47	655	537
Pulmonary Tuberculosis :						
Definite	1	—	5	—	6	—
Suspected	—	—	—	—	—	—
Non-Pulmonary Tuberculosis	11	—	79	4	90	4
Skin Diseases ...	899	771	152	103	1051	874
External Eye Diseases...	305	227	64	26	369	253
Vision and Squint ...	717	358 (Glasses prescribed)	56	23 (Glasses prescribed)	773	381 (Glasses prescribed)
Ear Disease and Hearing	314	193	159	59	473	252
Crippling Defects, Deformities, etc. ...	296	3	464	39	760	42
Malnutrition	1003	62	1815	176	2818	238
Enlarged Cervical Glands (Non-Tuberculous) ...	128	96	44	14	172	110
Defective Speech ...	9	1	33	4	42	5
Bronchitis	98	44	166	39	264	83
Other Non-Tuberculous Diseases of the Lungs	85	27	73	8	158	35
Heart and Circulatory Diseases	280	35	488	97	768	132
Diseases of the Nervous System	135	19	193	37	328	56
Other Defects & Diseases	1531	825	1125	260	2656	1085

It was known that 6 children were operated on for Squint.

Ringworm.

No. of Cases Treated.

	Local Authority.	Otherwise.	Total.
Ringworm—Scalp	2	—	2
,, Body	7*	1	8

*Seen at the School Clinic.

1 new case (a boy) of Ringworm of the Scalp was referred for treatment during the year, and 1 case continued treatment from the previous year. Both cases were declared cured before the end of the year.

In addition to the above figures, 2 cases under the age of 5 years were treated during the year, 1 being continued from 1937 and the other (a boy) being a new case. At the end of the year the new case was still under treatment, the other being declared cured.

The following graph shows the incidence of Ringworm of the Scalp amongst school children in Norwich since 1923.

All Ringworm contacts in the same family have been examined throughout the year.

No Norwich case received X-ray treatment during the year, but Dr. Levack, D.M.R.E., attended at Churchman House and treated 4 Norfolk County cases under a special agreement.

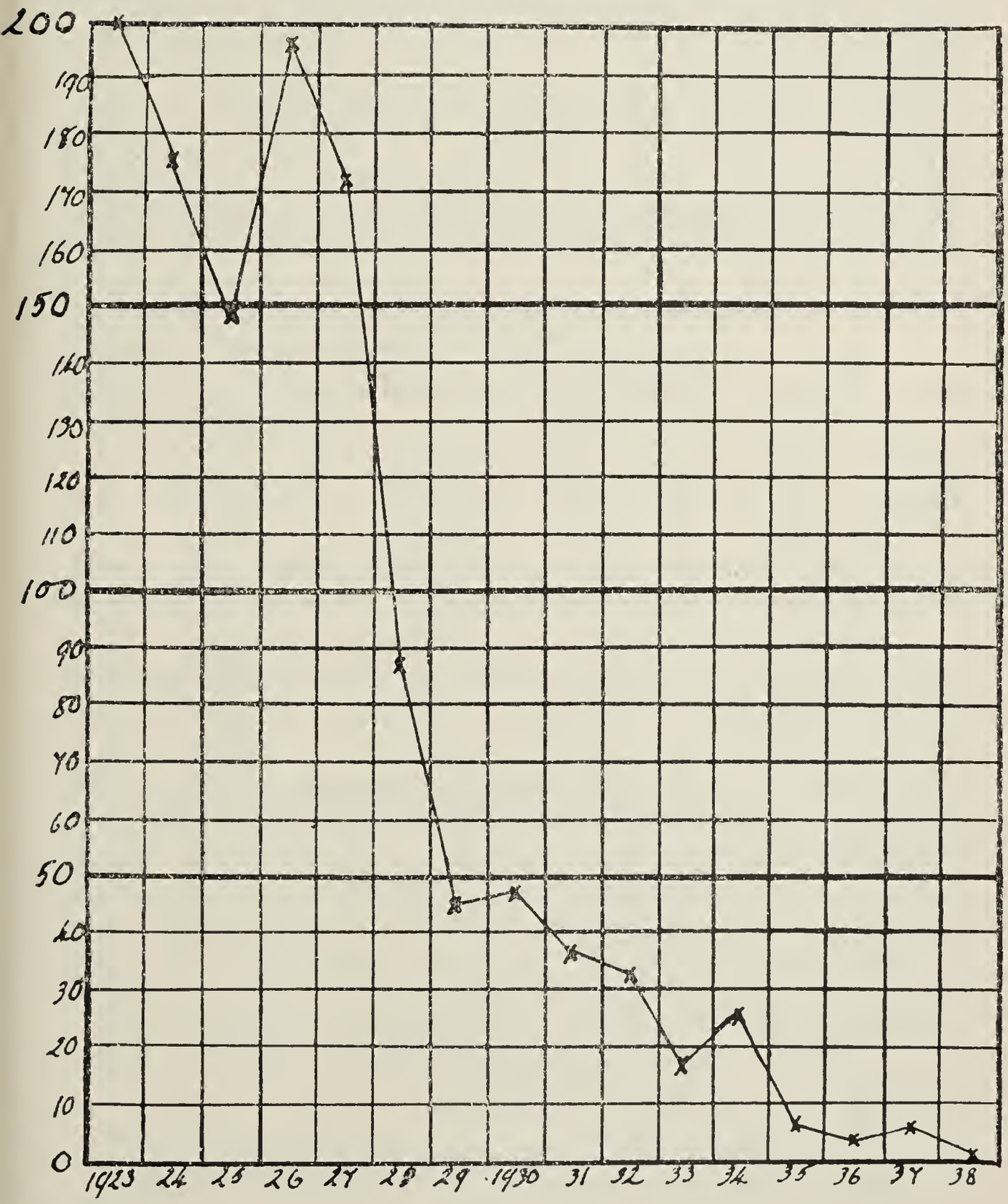
School Clinic.

18,528 attendances were made during the year at the Minor Ailments, School, and the Saturday morning "Special" Clinics.

The following is a summary of the defects treated :—

Disease.	No. of Children Treated.	Cured.
Ringworm of the Body	7	6
Scabies	24	23
Impetigo	259	243
Other Skin Diseases	657	545
Minor Eye Defects (Conjunctivitis, Blepharitis, Styes, etc.)	323	243
Ear Defects (Wax, Otorrhœa, Boils, etc.)	96	92
Enlarged Glands	67	64
Defects of Nose and Throat	101	89
Miscellaneous (Minor Injuries, Bruises, Sores, Chilblains, etc.)	1447	1376
Other Defects and Diseases	151	36

GRAPH SHOWING INCIDENCE OF RINGWORM OF THE SCALP IN SCHOOLCHILDREN SINCE 1923.



Defective Hearing.

During the year the only testing carried out by means of the 4-AE Audiometer was at the boys' and girls' Secondary Schools.

Children with a hearing level of minus 3 to 9 units were recorded as having normal hearing; those with 12 units as being slightly deaf, and those whose level was above 12, as being deaf.

If a child was found with a hearing level of 12 or more a second test was given. Experience has shown that in addition to this second test, a further test at an interval of approximately two months is advisable. Unfortunately a technical hitch occurred in the first boys' test, so that the results of that test are considerably higher than the average.

Sex	Total No. Tested	1st Test		No. Re-Tested	2nd Test		% of children Deaf after 2nd test
		No. not Deaf	No. Deaf		No. not Deaf	No. Deaf	
Boys	566	320	246	238	211	27	4.8
Girls	632	552	80	74	30	44	7.0
Total ...	1198	872	326	312	241	71	5 9

15 of the boys had a third test with the result that 10 more were found to have normal hearing, i.e., 66·6% of those tested for the third time. Arrangements are being made for the girls to receive a third test.

Those boys who were suspected to be deaf, either after the second or third test, were examined by the Ear Specialist, with the following results:—

No. examined	15
No. NOT deaf	7
No. deaf	8
Cause of deafness—	
Otorrhœa	4
Old Mastoid condition ...	1
Nerve condition ...	2
Middle ear deafness ...	1

Treatment of Discharging Ears.

The arrangements which commenced at the end of 1932, and which were extended in 1936, for the treatment of discharging ears in children have continued throughout the year.

During the year, 3 nurses have spent approximately half of their time in treating discharging ears at the schools, the whole city being divided into 3 districts and every school child, Elementary or Secondary, can be dealt with. Every case is seen periodically by the Specialist at the Clinic, and treatment is continued or modified according to his findings.

Children under 5 years of age, not attending any school, have been examined and the treatment carried out by the Cavell Nurses. A few of the children attending schools near the Jenny Lind Hospital can, and still do, attend there daily for the same treatment.

The cases which have been examined have come to our notice through various agencies, viz., the School Medical Staff, Head Teachers, Infant Welfare Centres and Public Assistance District Medical Officers' lists.

The following table shows the number of new cases of Otorrhœa found during the past 12 years :—

	No. of Cases.		
Year.	Elem.	Sec.	Total.
1927 ...	178 ...	4 ...	182
1928 ...	162 ...	6 ...	168
1929 ...	246 ...	2 ...	248
1930 ...	166 ...	2 ...	168
1931 ...	185 ...	2 ...	187
1932* ...	209 ...	5 ...	214
1933 ...	206 ...	6 ...	212
1934 ...	287 ...	4 ...	291
1935 ...	194 ...	7 ...	201
1936 ...	116 ...	4 ...	120
1937 ...	165 ...	2 ...	167
1938 ...	177 ...	6 ...	183

*Special Otorrhœa Clinic commenced.

135 new cases of discharging ears in Elementary School children were examined by the Ear, Nose and Throat Specialist during the year. In addition, 26 children who had been discharged previously as "dry," had a recurrence of the discharge. 3 new cases in Secondary School children were also seen, and, in addition, 2 cases where discharge had recurred.

The following table shows the number of new cases (Elementary) divided into sex and age, under and over 7 years :—

	Sex.		
Age.	Boys.	Girls.	Total.
Under 7 years	25	31	56
Over 7 years	43	36	79
Totals ...	68	67	135

126 cases of Elementary School children suffering from discharging ears who came to our notice previously to 1938 were also examined. In addition, 2 Secondary School cases were also examined.

The following tables show the recommendations made by the Specialist and the results obtained at the end of the year :—

Recommendation	Number. New.	Number. Old.	Number Cured. New.	Number Cured. Old.
Treatment by Ear Nurses ...	114*	95*	27	11
,, ,, Cavell Nurses ...	2	—	—	—
,, ,, Private Doctor ...	1	—	—	—
,, ,, Hospital ...	2	—	—	—
No Treatment considered necessary	47	33	46	32
TOTALS ...	166	128	73	43

All those recommended treatment in the above table, received treatment.

*Other treatment recommended for these cases in addition to treatment by the Ear Nurses was as follows :—

	New Cases.	Old Cases.
Tonsils and Adenoids Operations ...	14 (11 Cured)	—
Removal of Wax ...	4 (4 Cured)	1 (Cured)

Of the cases seen above, 2 also had boils and 1 had impetigo.

On the 31st December, 1938, 92 Elementary and 4 Secondary School children were actually receiving treatment, and 74 Elementary and 1 Secondary case were under observation.

Children under 5 years of age. 11 new cases (including 2 cases previously marked "Fit") were examined by the Specialist. 4 cases needed no treatment. 7 were referred to the Cavell Nurses for treatment, 4 of which had no discharge at the end of the year.

5 cases which came to our notice previous to 1938 were seen by the Specialist. 1 child was referred to the Cavell Nurses for treatment.

DENTAL INSPECTION AND TREATMENT.

THE SENIOR SCHOOL DENTAL OFFICER REPORTS :—

"The work of the Dental Department has developed during the past year, and the number of children rendered dentally fit has been increased.

8653 fillings (Elementary and Secondary School children) in permanent teeth were completed, and 1464 permanent teeth extracted. These figures show a decided increase in fillings and a decrease in extractions compared with those of 1937.

The number of sessions devoted to School Inspections was reduced to 37, and the additional sessions utilized for conservative treatment.

4873 children were inspected at school, and of these 2595 accepted treatment and were treated accordingly. 2125 children (including 197 Secondary School cases) were treated as casuals, this number including many of those who refused treatment when inspected and were only able to be seen later by appointment and in rotation.

Extractions under general anæsthesia were reduced to one morning a week, with the exception of very urgent cases which could not be postponed. 2294 general anæsthetics were administered, an average of over 50 cases per session of 3½ hours. This is far in excess of the number—20, suggested by the Board of Education.

Another important development this year has been the introduction of local anæsthesia for conservative treatment. Almost every child has a local anæsthetic before a tooth is filled. This, undoubtedly has been most successful. The children regard fillings without apprehension and nervousness, and the Dental Officers can work more quickly and efficiently.

59 root treatments were carried out in anterior teeth, resulting from fractures of the teeth by falls or extensive caries from delayed treatment.

The orthodontic treatment has proved to be a successful branch of the department. Many irregularities have been corrected, and there is no doubt that these corrections have in many cases minimised the incidence of caries. The satisfactory results are mainly due to the skill and special experience of one of the assistant dental officers.

72 minor surgical operations for the excision of labial fræna were completed, and the excellent results have obviated the necessity for orthodontic treatment at a later date.

It will be seen from these and the following figures that the treatment which three dental officers are capable of giving has reached saturation point.

4873 children, or 36% of the average attendance of the Elementary Schools were inspected during the year, leaving at least 64% of the school population in the city without inspection and treatment each year, except for the limited number dealt with in emergency. As the Elementary Schools are inspected in rotation, each child can only be inspected approximately every three years.

The obvious conclusion is that when these children are re-examined caries has considerably advanced—and many teeth which could have been saved by fillings in the initial stages of the disease must be sacrificed. Also more treatment is necessary than would be required by an annual inspection and treatment.

This deplorable state of affairs can only be remedied by increase of staff and extension of our inadequate premises.

A report of the work of the Dental Department up to June, 1938, was recently submitted by the School Medical Officer for the consideration of the Committee—and a request was made for the appointment of another Dental Officer. By this means it is hoped that the work will not accumulate, as at present. The children, examined in the schools, whose parents desired treatment must wait perhaps some months before an appointment for conservative treatment can be arranged. By this time the condition of the teeth has become progressively worse—and the interest which has been aroused by the dental inspection must necessarily diminish during the period of waiting.

The Chief Medical Officer of the Board of Education in his Annual Report asked for information regarding the restrictions on treatment imposed when the staff is inadequate to provide efficient treatment for all school children under the local authority. So far the scheme in Norwich only excludes children whose parents have refused treatment at the time of inspection—and even these are treated for relief of pain when an appointment is available.

Our thanks are due to the Dental Board for sending two lecturers to address the senior schools. These lectures stimulate the children to greater efforts in "Tooth mindedness" and oral hygiene. In connection with oral hygiene, it is interesting to report that the patients from the Local Authority's Children's Homes, as a rule, have the best mouths. The general condition of the teeth is good; the incidence of caries low, and the standard of oral hygiene and care above the average. This is attributed to the fact that the diet in these homes is controlled, the meals are regulated, and a minimum of biscuits and sweets are given.

The dentition of these children is quite remarkable when compared with the carious teeth of the children who live at home.

It appears to be a common fallacy amongst parents that teeth only require brushing in the morning. Oral hygiene is most necessary at night after the last meal. Biscuits and milk are given to many children in bed; this results in food stagnation round the teeth during the hours of sleep, resulting in rapid tooth destruction.

It is again pleasant to express our thanks to the Dental Surgeon in the City who has so willingly and ably helped us again this year, allowing us to refer urgent cases to him at his rooms for X-ray, and also for arranging as a routine measure to send cases to the Jenny Lind Hospital."

Elementary Schools. The Dental Officers devoted 37 half-days to the inspection of children in the schools and examined 4873 scholars—an average of 131·7 per session. 4042, or 82·9 per cent. were found to need treatment (in 1937, 75·9 per cent. were referred); 2595, or 64·2 per cent. of these attended at the School Dental Clinic for treatment (in 1937, 41·3 per cent. attended).

2249 children were sent to the Dental Clinic by the Medical Officers, Head Teachers, School Nurses, etc., for examination. In the opinion of the Dental Officers, 1928 of these needed treatment and received it—the total number of Elementary scholars treated during the year being 4523. These made 9898 attendances.

5709 teeth were extracted, and 6973 rendered artificially sound. 2199 general anæsthetics for extractions were administered.

Secondary Schools. Routine inspection is not carried out by the School Dental Officers, but cases of dental defect are referred direct when discovered (1) at routine medical inspection, and (2) by the Head Teachers. 174 children, or 12·4 per cent. of the number examined at routine medical inspection were referred for treatment.

During the year 197 scholars availed themselves of the facilities afforded at the School Dental Clinic, and paid 1753 visits. 270 teeth were extracted and 1687 teeth rendered artificially sound. 95 general anæsthetics for extractions were administered.

WORK DONE IN THE DENTAL CLINIC DURING—

	1938	1937	1936	1935	1934	1933	1932	1931	1930
School Children.									
(Elementary and Secondary)—									
No. Examined at School	4873	10868	17209	16685	6296	5978	4808	4741	5361
No. Treated, including "Specials"	4720	5197	7384	7453	5179	5388	5717	6130	6422
Total number of attendances at the Clinic ...	11651	12880	12842	12071	9720	9563	9562	9875	9604
No. of Teeth Filled ...	8660	8269	7149	3664	2202	1492	1671	1270	1723
No. of Teeth Extracted...	5979	6545	11200	16120	9458	11267	11605	11584	10389
No. of Administrations of General Anæsthetics ...	2294	2784	4830	5965	4352	4642	4098	3874	3295
No. of Other Operations...	2816	4129	2618	1734	816	799	760	1640	2929
Maternity and Child Welfare.									
Mothers—									
No. Treated	292	307	291	247	233	219	245	289	236
Total number of Attendances at the Clinic ...	1342	1317	1299	960	1142	1108	1267	1331	959
No. of Teeth Extracted...	1814	2115	2262	1830	1249	1460	1439	1527	886
No. of Teeth Filled and Other Operations ...	705	645	606	426	520	427	238	44	28
No. provided with Dentures	137	141	138	105	104	101	104	108	84
No. of Administrations of General Anæsthetics ...	479	495	543	454	469	482	412	375	223

Children under 5 years of age who attend no School—									
No. Treated	285	265	293	270	288	253	203	186	132
Total number of Attendances at the Clinic ...	296	281	311	305	325	312	385	353	230
No. of Teeth Extracted...	677	600	664	719	577	605	516	507	312
No. of Other Operations...	4	7	11	10	16	2	12	4	11
No. of Administrations of General Anæsthetics ...	279	272	293	271	297	288	240	206	140

Tuberculosis.

No. of Patients Treated ...	27	39	31	32	33	21	26	35	41
*Total number of Attendances at the Clinic ...	136	113	130	170	150	64	87	135	123
No. of Teeth Extracted...	113	132	89	149	155	106	69	131	104
No. of Other Operations...	98	65	70	93	71	17	14	9	22
No. of Patients provided with Dentures ...	16	6	18	18	12	4	7	5	9
No. of Administrations of General Anæsthetics ...	4	3	1	1	4	8	7	16	13

*Includes attendances on patients by visits of the Dental Officers to Institutions.

4 blind persons made 21 attendances, had 16 extractions, 2 general anæsthetics and 15 other operations. 3 received dentures.

3 children under the care of the Mental Treatment Committee were treated during the year. These cases made 5 attendances and had 11 extractions.

Treatment of Orthopædic Cases.

The Orthopædic Scheme was commenced in June, 1936.

This scheme covers the treatment of all children suffering from orthopædic defects, whether of school age or under, and the treatment of all cases of tuberculosis of the bones and joints. Mr. H. A. Brittain, F.R.C.S., was appointed Orthopædic Surgeon, and a Masseuse specially trained in orthopædic work was also engaged. Clinics are held at the local hospitals by arrangement with the Hospital Authorities, usually on Saturday mornings, and cases of orthopædic defects are referred to Mr. Brittain at these clinics.

With regard to slight postural defects which are so prevalent amongst scholars attending the Secondary and Technical Schools, special exercises are conducted for these children by the Gymnastic Teachers.

Cases are referred by the Doctors from School Medical Inspections, School Clinics, Infant Welfare Centres and the Tuberculosis Clinic. The hospitals also refer cases for inclusion in the scheme.

Whilst under treatment, the cases are seen by Mr. Brittain as often as may be required and at least every 12 months, and similarly by the Orthopædic Masseuse, but at least every 6 months. The arrangements for institutional treatment are that the cases go to the Norfolk and Norwich or Jenny Lind Hospitals for short term periods of treatment, i.e., 6 weeks or less, and to Melton Lodge, Great Yarmouth—an approved Orthopædic Institution under the Norfolk County Council—for long term periods of treatment, when accommodation is available.

The arrangements for the supply of surgical boots and instruments to school children were altered somewhat during the year. The Invalid Children's Aid Association was relieved of all work in connection with this matter. The work of obtaining estimates and ordering the appliances was transferred to my Department, whilst the Education Department took over the collection of contributions from the parents in those cases in which the Committee considered the parents were able to contribute towards the cost. Since June, 1938, 20 surgical boots and/or instruments have been supplied under these arrangements.

The following table shows the number of days spent in Institutions by orthopædic cases during the year :—

	School Cases.	M. & C.W. Cases.	TB. Cases.
Norfolk and Norwich Hospital	129	—	154
Jenny Lind Hospital ...	542	654	93
Cromer Convalescent Home ...	56	219	110
Melton Lodge	716	59	719
TOTALS	1443	932	1076

School Cases. 307 new cases (Elementary) and 50 new cases (Secondary) attended the Clinic during the year.

353 Elementary and 58 Secondary cases who attended the Clinic in 1937 continued attendance during 1938, making a total of 660 Elementary and 108 Secondary cases under treatment during the year.

The following table shows the treatment recommended and the results obtained by the end of the year :—

ELEMENTARY.

Recommendation.	No. Referred.		No. Treated.		No. Cured.	
	New.	Old.	New.	Old.	New.	Old.
Exercises at School, Hospital, etc.	117	115	112	115	—	12
,, and Wedges in footwear	17	14	16	14	—	1
,, ,, Plaster Splint ...	1	2	1	2	—	—
Wedges and Cleats in footwear ...	109	89	100	88	—	1
,, ,, Plaster Splint ...	1	1	1	1	—	—
Massage	—	1	—	1	—	—
Plaster and Strapping Correction	—	7	—	7	—	—
Surgical Boots and/or Instruments	2	25	2	25	—	—
Operations, etc., at Hospitals ... (Out-patient and In-patient)	14	27	10	19	1	3
Melton Lodge	—	2*	—	2	—	—
Other Treatment, e.g., Anti-rachitic, etc.	2	5	2	5	—	1
No Treatment necessary ...	44	65	—	—	3	18
TOTALS	307	353	244	279	4	36

*At the end of the year there were 3 cases awaiting admission to Melton Lodge. These have been included under other treatment headings in this table.

SECONDARY.

Recommendation.	No. Referred.		No. Treated.		No. Cured.	
	New.	Old.	New.	Old.	New.	Old.
Exercises at School, Hospital, etc.	23	34	18	34	—	1
,, and Wedges in footwear	6	1	1	1	—	—
Wedges and Cleats in footwear ...	5	8	4	8	—	3
Massage	—	1	—	1	—	—
Surgical Boots and/or Instruments	1	2	1	2	—	—
Operations, etc., at Hospitals ... (Out-patient and In-patient)	4	4	3	3	—	—
No Treatment necessary ...	11	8	—	—	1	2
TOTALS	50	58	27	49	1	6
GRAND TOTALS ...	357	411	271	328	5	42

The following table shows the diagnosis of the above-mentioned cases :—

Diagnosis	New Cases (in 1938)		Old Cases (Prior to 1938)		Total	
	Element-ary	Second-ary	Element-ary	Second-ary	Element-ary	Second-ary
Genu Valgum ...	107	5	81	7	188	12
Kyphosis and Scoliosis	67	18	89	34	156	52
"Valgus Feet" ...	25	8	42	10	67	18
Miscellaneous ...	108	19	141	7	249	26
TOTALS ...	307	50	353	58	660	108

At the end of the year there were 555 Elementary and 87 Secondary cases under observation or treatment.

There is a steady increase in the number of cases treated, the number of new cases referred (357) exceeding the number of cases cured (47) by a very large margin (310). Unless the number of

those cured increases, there will again be a large addition next year to the total under treatment. Although the total of 768 cases is large, in at least two-thirds of the cases, the defect is not serious and does not interfere with the child's physical activities, nor does it cause symptoms.

Children under 5 years of age. 111 new cases and 95 cases continuing treatment from 1937 were seen at the Clinic during the year, and the following recommendations were made and results obtained :—

Recommendation.	No. Referred.		No. Treated.		No. Cured.	
	Old.	New.	Old.	New.	Old.	New.
Wedges and Cleats in footwear ...	41	45	41	44	7	—
Massage and Stretching ...	5	4	5	4	—	—
Plaster correction	4	4	4	4	—	—
Operations and Treatment at Hospitals	8	12	8	8	—	—
Treatment at Melton Lodge ...	—	1	—	1	—	—
Exercises and Splint	—	2	—	2	—	—
Massage and Wedges	—	1	—	1	—	—
Anti-rachitic Treatment ...	9	23	9	23	1	—
Surgical Instruments	3	6	3	5	—	—
Wedges and Plaster Splint ...	1	3	—	3	—	—
Strapping correction	—	1	1	1	—	—
No Treatment necessary ...	24	9	—	—	3	1
TOTALS	95	111	71	96	11	1

The diagnosis of these cases is as follows :—

	Old Cases.	New Cases.	Total.
Genu Valgum	37	34	71
Kyphosis and Scoliosis ...	—	—	—
"Valgus Feet"	5	12	17
Miscellaneous	53	65	118
TOTALS	95	111	206

At the end of the year there were 190 cases receiving treatment or under observation.

Tuberculosis Cases. 1 case of Tuberculosis of bones attended the Clinic in 1938 for the first time; 18 old cases continued attendance during the year. They were dealt with as follows:—

Recommendation.	Total No.	No. Treated.	No. Cured.
Operations and Treatment at Hospitals	6	4	1
Treatment at Melton Lodge ...	4	4	—
Surgical Instruments ...	3	3	—
No Treatment necessary ...	6	—	2
TOTALS	19	11	3

The diagnosis of these cases is:—

TB. of the Hip	8
,, ,, Knee	3
,, ,, Spine	4
,, of other Bones and Joints	4

Health Committee Cases. The Health Committee has accepted responsibility for the treatment of a few cases over school age of severe orthopædic defect who received treatment under the Scheme whilst at school. During the year, 7 such cases were dealt with as follows:—

Recommendation.	Total No.
Surgical Instruments	5
Hospital Treatment	1 (Refused)
,, ,, and Surgical Boots	1
TOTAL	7

5 of these were cases of old infantile paralysis, 1 was a case of multiple defects and the other a case of osteomyelitis.

UNCLEANLINESS.

The School Nurses visit the schools periodically for the purpose of examining children for uncleanliness.

Under Section 73 of the Norwich Corporation Act, 1933, the School Nurses report any children they find whose persons or clothing are in a verminous or filthy condition, to the office; the children are immediately excluded from school and a Statutory Notice is sent to the parents giving them 24 hours in

which to cleanse them. The standard adopted is that if a single nit or louse is seen, the child is excluded and a Statutory Notice sent. No child is re-admitted to school without a medical certificate of cleanliness. Similar action is taken in any case found by a doctor during medical inspection or at the Clinc. If a child attends the Clinic before the 24 hours' notice has elapsed and is still not clean, the parents are offered voluntary cleansing, but if the 24 hours have elapsed, the child is compulsorily cleansed. After compulsorily cleansing a child for the first time, the School Nurse visits the parents and gives instructions as to the best methods of cleansing. The Committee have decided to prosecute the parent of any child, for whom 3 Statutory Notices have been served within a period of 2 years.

In 1938, Statutory Notices were served in respect of 0·9 per cent. of the children examined (in 1937 0·8 per cent. were so dealt with. [For the first time, this percentage figure is based on the number of individual children found unclean by the School Nurses only.]

The following table shows the number of Statutory Notices served in respect of Elementary School children and the results obtained :—

	1938.	1937.	1936.
No. of children examined by the School Nurses	31879	32495	40411
*Total No. of Notices served ...	325	314	705
,, ,, Individual children concerned	296	293	614
,, ,, cases voluntarily cleansed	151	132	229
,, ,, cases compulsorily cleansed	136	142	310
,, ,, cases cleansed at parent's request	38	37	161
,, ,, cases not cleansed (left school, under age, etc.)	—	3	5

*These figures include the cases found by the School Medical Officers and the School Nurses.

During the year, 2 parents were prosecuted, twice each, in respect of the same child, 2 parents twice (once each in respect of 2 individual children), and 7 parents once each. 3 cases were dismissed with cautions, and the others were fined sums varying from 1/- to 10/-. In addition to those mentioned above, 3 letters of warning were sent to parents, on the instructions of the Committee.

11 other cases of uncleanliness were dealt with at the Clinic, no Statutory Notices being issued in respect of these cases.

No notices *re* uncleanliness of clothing were sent out during the year.

Head Teachers notify me of the names and addresses of any children they have had to exclude from school for uncleanliness. These cases are visited by the School Nurses and are not re-admitted until certified fit by one of the Medical Officers. With a view to promoting cleanliness in the schools, "Sacker Hygienic Combs" have been sold from my Office to parents at cost price or less, or given free in necessitous cases.

During the year, the School Nurses made 31,879 examinations of children in the Elementary Schools for uncleanliness. 281 individual children were found unclean.

The School Nurse paid 6 visits to the Girls' Secondary School and made 1797 examinations for uncleanliness. 1 child was found unclean.

Speech Training and Stammerers' Classes.

Weekly sessions are held at one of the more centrally situated schools in the city, and during the year the Speech Therapist also held a weekly session at the Open Air School.

The following is a report from the Speech Therapist:—

"During 1938, 55 children passed through the Speech Training and Stammerers' Classes. Of these, 22 were stammerers. Of these 22, 15 showed different degrees of improvement and 5 none during that year. Improvement is a comparative term, and of these 15 cases some now speak nearly normally, while others have only just started to show a change in their general nervous condition. Of the 5 who showed no improvement during 1938, 2 only joined the classes during the last half term and 2 others have shown improvement earlier in their treatment. 2 more cases were discharged by the doctor as cured. Of the 33 children to pass through the Speech Training Classes, 11 were discharged as cured, 21 showed improvement, and 1 child attended only three or four times (and cried most of the time). Of the 11 children to be cured, 7 were cases of sigmatism. Of the 21 who showed improvement, 8 were cases of cleft palate speech, and although some of these children now speak very much more clearly I can never claim to cure such cases; we can only approximate to normal speech. 7 others to show improvement were from the Open Air School."

(8) **Infectious Diseases.** The general arrangements with regard to infectious diseases have remained unaltered.

Unfortunately there are still one or two Head Teachers who do not notify me of cases of infectious disease in the schools, although the great majority do so, and this co-operation on their part is highly valued.

66 cases of Chicken Pox, 38 Diphtheria, 11 Scarlet Fever, 33 Mumps, 12 Whooping Cough, 1 Erysipelas and 3 Measles were discovered at the School Clinic, or, in the case of Diphtheria, by the routine swabbing of contacts of school age.

Diphtheria was rather more prominent in the schools than for the two previous years with 102 cases, although this incidence was not very heavy. The area chiefly affected concerned Wensum View, Nelson Street and Colman Road Schools, with 38, 12 and 7 cases respectively, whilst Norman and Dowson Schools had 7 and 6 cases respectively. It will be observed that the schools chiefly affected are those connected with the new Larkman Lane Housing Estate and the present organisation of the school system probably helps to spread infectious disease in the affected area. Another point which is considered to be of importance in this matter is the fact that many of these children have been travelling to their schools in special buses, and crowding together under these circumstances is inevitable. There were eight deaths from Diphtheria in school children in 1938. In 1935 there were 8 deaths, in 1936 there were 6 deaths, and in 1937 there were 7 deaths from this disease in school children. Nelson Street and Colman Road Infants' Departments each had 2 deaths, and there was 1 death in each of the following schools—Wensum View Primary Girls', Philadelphia Infants', Sprowston Infants' and The Blyth Secondary School.

Immunization is urged by the Health and Education Committees, but the response continues to be poor.

Scarlet Fever with 114 school cases was definitely quieter than usual.

The outbreak of Measles which started about June, 1937, was continued in 1938. The number of cases in 1938 was 530, but a glance at the Infectious Diseases table on pages 172-173 shows that the total outbreak amounted to 734 cases. This is a comparatively small outbreak, and is a little remarkable in that it

INFECTIOUS DISEASES IN SCHOOLS, 1938.

Schools.	Number on Roll.	Diphtheria.			Scarlet Fever.		Measles.		Rubella (German Measles)		Chicken Pox.		Whooping Cough.		Cerebro-Spinal Fever.		Mumps.	Non Pul. T B.	Dysentery.
		Cases.	Carriers	Contacts.	Cases.	Contacts.	Cases.	Contacts.	Cases.	Contacts.	Cases.	Contacts.	Cases.	Contacts	Cases.	Contacts.	Cases.	Cases.	Cases.
Angel Road	726	1	1	—	12	5	1	—	—	—	21	—	26	—	—	—	16	—	—
Avenue Road... ...	813	1	1	—	9	5	74	5	1	—	47	—	6	—	—	—	10	—	2
Bignold	510	—	5	6	3	2	29	—	—	—	4	—	—	1	—	—	3	—	1
Bull Close	453	4	2	7	9	1	40	2	—	—	2	—	2	—	—	—	2	—	2
Catton Grove... ...	730	1	—	—	7	3	46	—	—	—	78	—	11	5	—	—	1	—	1
Cavell	438	3	—	3	1	3	—	—	—	—	14	—	11	—	—	—	5	—	4
College Practising ...	248	—	—	1	5	4	11	2	—	—	2	—	—	—	—	—	4	—	—
Colman Road... ...	745	7	2	8	4	8	68	4	—	—	71	—	10	—	—	—	2	—	4
Crome	283	2	—	1	—	1	—	—	—	—	1	—	—	—	—	—	1	2	—
Dowson	917	6	4	15	7	7	30	7	—	—	47	—	45	9	—	—	52	2	1
George White ...	648	3	4	2	1	3	—	1	1	—	5	—	—	—	—	—	1	—	3
Heigham Street ...	177	—	1	—	1	—	—	—	—	—	2	—	5	—	—	—	3	—	2
Horn's Lane	337	—	1	—	3	7	—	—	—	—	1	—	9	—	—	—	—	—	1
Lakenham	617	3	—	2	6	8	18	—	—	—	27	—	2	—	—	—	25	2	4
Lakenham St. Mark's ...	634	—	—	2	1	5	—	—	—	—	34	—	11	—	—	—	2	1	2
Model	239	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Mousehold Avenue ...	195	1	1	1	2	1	34	1	—	—	3	—	4	1	—	—	—	—	—
Nelson Street... ...	1127	12	4	22	3	5	5	2	—	—	16	—	9	—	—	—	47	1	2
Norman	841	7	3	15	10	17	41	—	1	—	32	—	24	2	—	—	5	—	3
Philadelphia	283	2	1	18	3	3	6	—	—	—	1	—	2	—	—	—	—	—	2
St. Augustine's ...	869	1	—	—	5	4	11	—	—	—	6	—	7	1	—	—	1	3	4
St. Giles'	107	—	—	—	1	1	1	1	—	—	—	—	—	—	—	—	1	—	—
Sprowston	20	1	—	—	2	—	—	—	—	—	4	—	3	—	—	—	—	—	—

Stuart ...	...	230	2	—	1	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—
Thorpe Hamlet	...	861	2	—	6	2	4	28	—	1	—	123	—	4	—	—	—	2	2	—
Wellesley ...	...	308	—	—	3	6	2	4	1	—	—	37	—	—	—	—	—	1	1	—
Wensum View	...	1058	38	3	33	7	12	83	14	—	—	55	—	—	—	—	—	88	1	5
Willow Lane ...	...	448	1	—	1	1	1	—	—	—	—	—	—	7	5	—	—	1	—	—
Blyth Secondary	...	618	3	1	5	1	3	—	1	—	—	1	—	—	—	—	—	1	—	—
City of Norwich	...	586	1	—	3	—	1	—	2	—	—	2	—	—	—	—	—	—	—	—
Technical School	...	154	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Junior Art School	...	55	—	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—
Junior Commercial	...	120	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—
Colman Rd. Open Air	...	312	—	1	5	2	3	—	—	—	—	3	—	—	—	—	—	1	—	1
Totals for 1938*	...	**16707**	**102**	**35**	**162**	**114**	**120**	**530**	**43**	**4**	**—**	**640**	**—**	**198**	**24**	**—**	**—**	**276**	**17**	**44**
,, ,, 1937¶	...	17103	80	18	177	220	229	204	32	15	—	341	—	225	28	—	—	72	13	27
,, ,, 1936†	...	17509	73	22	150	128	200	1647	441	10	—	388	—	466	45	—	—	21	19	—
,, ,, 1935§	...	18232	113	36	189	87	115	1	—	—	—	245	—	58	3	2	4	9	23	—
,, ,, 1934‡	...	18438	157	38	305	338	422	1301	219	6	—	291	—	302	45	—	1	746	—	—
,, ,, 1933	...	19655	80	40	150	219	276	65	8	2	—	408	99	145	26	—	—	236	—	—
,, ,, 1932	...	19371	142	—	295	155	193	637	145	427	—	208	63	286	43	1	4	6	—	—
,, ,, 1931	...	18865	77	—	174	73	97	6	7	57	27	506	108	157	21	4	12	4	—	—

*In addition there was 1 case of Pulmonary Tuberculosis at St. Mark's School and 1 Hæmolytic Streptococci carrier at Bull Close School.

¶In addition there were 5 Hæmolytic Streptococci carriers at Bull Close School and 2 at St. Giles' School; and 2 cases of Acute Poliomyelitis, 1 at Thorpe Hamlet School and 1 at The Blyth Secondary School.

†In addition there was 1 Hæmolytic Streptococci carrier at Avenue Road School, 1 case of Acute Poliomyelitis at Heigham Street School, and 1 case of Typhoid Fever at Avenue Road School.

§In addition there were 2 Hæmolytic Streptococci carriers at Dowson School, and 2 cases of Typhoid Fever—1 at Bull Close School and 1 at Dowson School.

‡In addition there was 1 case of Enteric Fever at Avenue Road School.

started in June, 1937, and finished about June, 1938, which was unusually long drawn out. The explanation of this is not obvious, but it may be connected with the transference of population in connection with re-housing activities. There was one school boy suffering from Measles who died, but in this case there was the additional complications of Toxæmia, Bilateral Empyema and Broncho-Pneumonia.

Whooping Cough was not quite so active, but Chicken Pox, with 640 cases, and Mumps, with 276, were definitely above the usual activity.

The Sonne Dysentery outbreak, which started in 1937, was continued in 1938, and 44 cases were notified. It is practically certain that this is not the complete number of cases.

Pulmonary Tuberculosis.—1 school boy was notified as a case of Pulmonary Tuberculosis. It was a case of Pleurisy with effusion, and was considered to be tuberculous in origin.

In the spring there was a slight outbreak of Conjunctivitis in some of the schools.

7 cases received voluntary prophylactic vaccination against Whooping Cough.

One must again emphasise the fact that the great majority of these infectious diseases are practically certainly passed on by droplet infection. This also undoubtedly applies to the common cold and influenza. Without a thorough open-air system of education there would appear to be no hope of preventing the spread of these infectious diseases in the schools, which are undoubtedly the great "sea" of infection to which all streams run, and from which streams run in every direction. Better spacing between the children might help a little, but it is obvious that if 40 people come in from all different sources and spend several hours every day in close communication within four walls and a roof, there can be no hope of preventing the spread of these diseases. Masks might be worn, but they are liable to become more of a danger than a safety. The suggestion that the modern school of a so-called open air type is of any value in preventing the spread of infectious disease is quite ludicrous and it is very unfortunate that the Education Committee have not seen their way to make an experiment by the establishment of one really open-air class, and have, on the contrary, adopted a resolution which postpones further consideration of the subject for approximately six years.

(9) **Open Air Education.**

(*a*) *Playground Classes.* In a number of schools, when the weather is suitable, a few lessons are given in the playgrounds. Some of the schools have sessions allocated to them for organised games and out-of-door education on Eaton Park.

(*b*) *Open Air Classrooms in Public Elementary Schools.* No Open Air Classroom has been provided yet, and it is unfortunate that the Education Committee reversed, in 1938, the decision arrived at in 1935.

(*c*) *School Journeys and Camps.* Excursions are made at suitable seasons for the purpose of giving instruction in nature study. Each year a number of children are sent to the seaside by "Pearson's Fresh Air Fund." Each child is examined for uncleanliness by one of the Medical Officers before departing.

Several of the schools have sent parties of children to the Authority's camp at Trimingham, usually for periods of one week each. Other school parties have made use of the camp during week-ends under voluntary arrangements.

(10) **Physical Training.** The School Medical Inspectors give directions only when, for medical reasons, physical training is not desirable, or if some special form is required.

Extracts from the Report of the Organiser of Physical Training.

Introduction.

"The arrangement made between the Education Committee and the Gt. Yarmouth Education Committee for the sharing of the services of the two organisers of physical training has now been in operation for nearly two years, a period sufficiently long to test the efficiency or inefficiency of the arrangement. With the increasing amount of organisation, due to the building and planning of gymnasia, equipping of schools, arranging of swimming and organised games time tables, conducting of teachers' and leaders' classes, arranging demonstrations and the many tasks and duties which fall to the lot of the organisers in a city of this size, it is becoming more and more difficult for the organisers to spend sufficient time on school visits. It can be said, unfortunately, that too little time has been spent on the supervision of, and the assistance given to, the teachers in the

schools. Although every effort has been made to visit each school department regularly, this has not been possible owing to the ever increasing amount of office work and general organisation.

"Physical training has been brought more and more to the fore during the past year, and the tasks with which the organisers are faced, not only for school but also for post-school ages, are assuming proportions out of all reason to the limited time of three and two days respectively of the man and the woman. It is felt that the full services of a man and a woman are required to efficiently carry out the duties in a more comprehensive and effective way, and that it is quite impossible to do full justice to the two Committees on the present arrangement of duties.

General.

"The position of physical training from both an educational and recreational view point has been brought more than ever into the public eye during the past year, and has now reached the state of being considered of great national importance. There has been a demand for more systematic and progressive training in all branches of physical activity.

"In the schools, with which this report is mainly concerned, the teachers, parents and children have shown much enthusiasm for the physical education which is being made possible by the added facilities provided by the Committee. The teachers have been eager to attend courses and receive suggestions through which their teaching and methods of training could be of increased value. The work in the schools has steadily improved and become more beneficial to the children. Physical exercises, Dancing, Games, Swimming and Athletics have been approached in an attractive way and the response from the children and the resulting benefits which have accrued are proof of the importance of this side of the educational scheme.

"The work must be made attractive and good sound habits be acquired whilst a child is attending school if the aims are to be achieved. Personal hygiene and physical fitness are probably of more importance in later years than during actual school attendance, and it is the duty of the teachers to instil into every child the necessity of body care and culture. Cleanliness, fitness for the work which has to be done, and a sound social and moral outlook are all part and parcel of physical education, and it is during the physical activities of the school when the foundations can best be laid.

"The teacher must have in mind constantly that the scheme of exercises, games and the like are only the means to an end, the end being a sound body controlled by a sound and healthy mind.

"To speak of the more concrete and visual part of physical training, there are two points which the organisers feel need to be stressed more strongly. The first is POSTURE and CARRIAGE. Too much emphasis cannot be laid on the normal posture and carriage of the child, and it is hoped that the teachers will endeavour still more to attain a higher standard amongst the children. It is often a very uphill fight, and to achieve good posture and carriage throughout the schools is worth the special attention which is entailed.

"The second point concerns movement generally. On the average the children lack spring and lightness. They tend to be heavy and flat-footed in their movements. In the schemes from which the teachers work there are ample exercises and activities designed to improve this undesirable weakness. It is urged that teachers make fuller use of these and bring spring and lightness of movement to the children.

Infant Schools.

"The need of free unrestricted movement cannot be too greatly stressed for small children. The teachers are now well aware of this fact, and great strides have been made in this direction during the year.

"The highly polished floors in a number of school halls are detrimental to the promotion of correct footwork.

Primary Schools.

"The work in the Primary Departments has been maintained at a fairly high level. The teachers generally are interested in the work and have a good knowledge of how to conduct a lesson in the right spirit. The spirit in which the lesson is conducted is of greatest importance; free and purposeful activity throughout is the keynote of the lesson, and although formal exercises have their rightful place, free practice with and without apparatus should be permitted every lesson.

Senior Schools.

Girls.

"Work has been going on steadily during the year. Owing to a further supply of portable apparatus, it has been possible to reach a higher standard of efficiency.

"Both the free-standing and apparatus work is now being tackled with greater confidence and ease on the part of the girls.

Boys.

"In all departments the work is shared by two, three or more teachers. This arrangement is a desirable one, and it is hoped that there will always be sufficient new young teachers to carry on in this way.

"The work in the senior boys' departments has advanced considerably during the year. With the introduction of a set scheme of tables the work has become uniform, and progression according to age groups has been maintained. The tables of exercises and activities now attempted by the teachers are much more simple and the standard of attainment has been raised to a satisfactory level without detracting from the value in any shape or form. The teachers have proved themselves capable and efficient, and have always been open to suggestions which improve their methods of teaching.

"In the actual teaching of the tables it is felt that although rhythm now plays a big part there needs to be more emphasis laid on the static and postural exercises. Rhythms also tend to be too fast to have the required effect, and it would be to the advantage of the work if slower rhythms, which allowed bigger and fuller range of movement, were used.

Organised Games.

"Much progress has been made in 1938 in matters connected with organised games. Through co-operation with the Parks and Gardens Committee in the use of Public Parks and Recreation Grounds, it has been possible for every senior school, and the senior classes of many of the primary schools, to have at least one organised games period at the playing fields each week. The amount of apparatus has been increased, and the facilities for play improved, with the result that greater advantage has been taken of the time spent on the playing fields.

"Despite the willing co-operation of the Parks and Gardens Committee and the Head Gardeners, the facilities offered in the public parks are not as satisfactory as in the case of grounds owned and controlled by the Education Committee. The marking of suitable pitches, particularly for the girls, is not always carried out, and constant changing of those pitches which are marked and the places available for use, due to the heavy call made on the grounds by the several users, all combine to make

it difficult to get the best out of the games period. There is no doubt at all that more benefit is derived from organised games by children attending the Committee's grounds, particularly those adjoining schools.

"There is much unavoidable waste of time in travelling backwards and forwards from school to field. This has been overcome in certain cases by the provision of transport and temporary classrooms at Eaton Park. During the summer months, from the end of May to the end of October, when this very valuable scheme was in operation, 675 children from 6 school departments were conveyed to and from Eaton Park each week. Although this scheme is successful, it must, however, be admitted that it is not the ideal solution but an attempt to overcome the lack of a playing field adjoining the schools.

"It is most encouraging to report that during the year the playing field space for the Elementary Schools was increased from 19 acres to 32 acres, and a further 48½ acres have been acquired which will be available during the course of 1940 or the early part of 1941. In the main these grounds are adjoining school premises, and each senior school, when re-organisation and re-building is completed, will have direct access to a playing field, in most cases, of suitable size. Each of the fields serving a senior boys' school will have a concrete practice wicket and nets for cricket. The primary schools will also benefit.

"The possibility of teaching and coaching in tennis has been explored, and an effort is being made to introduce this at two grounds serving 4 senior girls' schools. Many of the works and shops, where elementary school children are employed on leaving school, organise sports and social clubs in which games such as tennis and badminton play a prominent part. For this reason the introduction of tennis, or, in fact, any racket game, is to be strongly encouraged.

Dancing.

"The dancing lesson still continues to hold its rightful place as part of the physical education scheme. The stimulating lessons given by the teachers have received a keen response on the part of the children. This keenness manifested itself when the children's country dance party was held during the afternoon of Saturday, 2nd April, at Angel Road School. This was an outstanding success, both from the point of view of the number attending and the enthusiasm displayed on the part of the children.

Swimming.

"Owing to the Whitsuntide holiday being later, the swimming season did not commence until 14th June. The two Indoor Baths closed on 1st September, and consequently the schools attending there had a season of only seven weeks instruction under school supervision and four weeks voluntary attendance during the holidays. Of the Open Air Baths, the Wensum and Eagle were open until 18th September, and the Lakenham to the 4th September (the latter was also closed for one week previous to the summer holidays due to sewage entering the water), resulting in seasons of nine and seven weeks respectively of instruction under school supervision and four weeks voluntary attendance during the holidays. The previous seasons have been uniform in length at all Baths, and were, in 1936—16½ weeks, and in 1937—14½ weeks.

"Under the best of conditions, and making full use of the whole of the facilities in the city, swimming instruction falls very far short of what is needed. Compared with other cities of equal size and importance, the facilities for this very important branch of physical education are deplorable. Last year the following points made instruction even more difficult than in previous years:—

1. Extreme shortness of the swimming season caused by the late start, the closing of the two Indoor Baths at the end of and during the season.
2. The unusually low water temperature in the Open Air Baths.
3. Greater opposition from parents and teachers to the use of the Lakenham and Wensum Baths.
4. The demand made on the indoor baths was so great that the classes were, unavoidably, too large and too mixed, in that Life Savers, Swimmers and Learners were together in varying numbers at one time.

"The Eagle was the best attended Open Air Bath, with an increase of 241 in the number of children under regular instruction; the numbers at the Lakenham Bath decreased by 128, and the Wensum by 491. It has been still more difficult during the year to maintain attendance at the Wensum and Lakenham Baths, due to the refusal of teachers and parents to allow the children to enter the water. This opposition, which is very strong, and with good foundation as these Baths are quite unsuitable for swimming instruction, resulted in increasing the attendance at

the Indoor Baths where added facilities were obtained. The following shows a comparison between the figures for the past three years:—

	Number of children under regular instruction.				
	Lido.	Samson and Hercules.	Eagle.	Lakenham.	Wensum.
1936 ...	534	1230	864	819	1030
1937 ...	588	1583	669	559	785
1938 ...	1201	1880	910	431	294

"The number of certificates (17 yards) gained in July by children attending the Lido and the Samson and Hercules Baths, after only six weeks' instruction, that is, a maximum of six lessons, was 77 more than last year.

Gymnasia, Halls and Playgrounds.

"The year 1938 has been one of planning. Gymnasia have been considered, and in many cases planned, for each senior department, having in mind the proposed future reorganisation of the schools.

"There has been very welcome co-operation between the Architect's Department and the organisers of physical training in the planning of these gymnasia, and it is felt that although the ideal gymnasium has not yet been designed, the proposed new buildings will be a big step towards this ideal. Changing and showering facilities present many problems, the undressing, showering, drying and dressing of classes of 40 or more children, in the very short time which is available, requires very careful consideration when planning the layout of the rooms set aside for this purpose. It is obvious that there needs to be ample space and an uninterrupted flow throughout if the process is to be satisfactory.

"There has been an improvement in the halls and playgrounds used for physical training. The floor surfaces of the majority of the school halls were extremely dangerous and most unsuitable, due to the highly polished finish aimed at by the caretakers. Although it has not been possible to completely remove this polish and substitute a suitable non-skid surface, the polishing has been discontinued and the floors are gradually becoming suitable for use once more.

"The use of the hall for the primary and infant departments is essential, due to the amount of inclement weather experienced during the winter months, and it is pleasing to report that only

in 4 schools has it not been possible to free the hall for this purpose and in 2 of these cases facilities have been obtained close at hand.

"The condition of the playgrounds continues to be good. Only in two primary departments and two senior departments are there really bad playgrounds which cannot be adapted or used to good advantage. In the remaining schools ample space is available and surfaces generally are good.

Clothing.

"The provision of shoes and clothing for use during the physical training lessons has been a great help in increasing the value of the work taken by the teachers. In all the senior schools children now wear suitable clothing, and in the primary and infant departments each child has a pair of rubber shoes. This move to increase the value of the physical education of the children has, however, not yet been completed. The problem of interchanging of clothing without some means of thoroughly cleansing and sterilising the garments is a very grave one, and open to much criticism. So far there has been no solution found, but the Committee would be well advised to arrange for the cleansing and disinfecting of all shoes and clothing at the end of each term, or, at least, at the end of each school year.

Teachers' Courses.

"Courses have been held at the Y.W.C.A. Headquarters in physical training and games for men and women teachers in all school departments. These were held either during the morning or afternoon sessions, and supply teachers were sent to schools where conditions necessitated this consideration.

"The number of teachers attending the Courses was as follows:—

1.	Men teachers in Senior Schools	12
2.	Women teachers in Senior Schools	15
3.	Men teachers in Primary Schools	15
4.	Women teachers in Primary Schools ...	53
5.	Women teachers in Infant Schools	46
	Total	141

"In addition to the courses arranged by the Committee, grants were paid to 3 men teachers and 2 women teachers from senior departments who attended a Vacation Course at Blackpool during Easter week, and to 1 man from a primary department

who attended a Vacation Course at Loughborough during August. These teachers are to be congratulated on their enthusiasm, and the resulting increase in efficiency points to the value of attendance at such Vacation Courses.

Recreative Physical Training for Juveniles.

"The demand for recreative physical training classes increased during the year, and 9 new classes were formed. It is interesting to note that of these 6 were for youths. Below is a summary of the classes which are under the control of the Committee, the figures for last year being bracketed:—

	No. of classes.	Nos. on roll.	New classes formed.
Youths ...	9 (3)	205 (57)	6 (2)
Women ...	13 (10)	310 (225)	3 (2)

"It is encouraging to report that the whole position of recreative physical training for adolescents and the adults has progressed a great deal in 1938, and the future promises to be even more successful.

Norwich Schools' Athletic Association.

"This report would be incomplete without reference to the above Association. The Association is composed of a number of sections which deal with the various branches of games and sports. The work, which is purely voluntary, is done by the teachers out of school time. Much credit is due to those teachers who give up their time and go to such great lengths to improve the games and sports of the boys and girls in the schools. They do a great service by their efforts, and the work of the organisers is very much assisted by the helpful and willing co-operation which is always met with from all sections."

(11) **Provision of Meals.** The School Medical Officer occasionally visits the Dining Centres, advises on questions of diet, selects the children for meals, and generally advises the Sub-Committee responsible for the physical care of the children.

Meals are supplied in Norwich in the following manner:— (1) in the Domestic Subjects Rooms of the Senior Girls' Schools, and (2) from the Central Kitchen.

Food is cooked at the Central Kitchen and delivered to six centres by motor van, where the food is served to the children by supervisors, while some children attend the Central Kitchen for meals.

Centre.	Number of children (22nd Dec.).	Supervisors.
Cavell	14	1
Central Kitchen ...	41	2
George White	28	2
Norman	36	2
St. Bartholomew's ...	35	2
Sun Lane	28	2
Thorpe Hamlet ...	45	2

In the eight Domestic Subjects rooms food is cooked and served direct to the children by the Domestic Subjects Teachers.

Domestic Subjects Rooms.	Number of children (22nd Dec.).
Colman Road	31
Dowson	36
George White	17
Lakenham	8
Model	18
St. Augustine's	19
Thorpe Hamlet	19
Wensum View	26

During the year under review 47,019 meals were provided for 543 children attending Elementary Schools, and 4403 meals for 40 scholars attending the Secondary Schools. In 1937, 33,030 meals were provided for 281 children. Children receiving meals are re-examined approximately every 3 months.

Owing to a Nutritional Survey in August, 1938, a considerable number of children started meals between September and December. (See page 197.)

The Education Committee continued to supply accredited milk to the malnourished children in schools on medical recommendation. This was supplied twice daily, i.e., morning and afternoon, a half pint on each occasion. During the year, 677,347 of these "Milk Meals" were provided for 2536 children attending Elementary Schools, and 16,747 "Milk Meals" were provided for 101 Secondary School children. The children are examined approximately every 3 months.

The Health Committee continued to supply milk at home on medical recommendation and upon application from the parents, for those children who were unable to attend school through illness or disability, and for those children who had reached the age of 5 years and so ceased to be under the care of the Maternity and Child Welfare Committee but who were unable to attend school until the following term owing to lack of

school accommodation. This latter provision chiefly affected a few cases on the new housing estates. During the year 3661 pints of accredited milk were supplied to 158 individual children.

All the Elementary Schools, excepting one, and all the Secondary Schools make use of the Milk Marketing Board's Scheme for the provision of 1/3rd of a pint of milk for children at a cost of ½d. per bottle. In the last school week of the year 4949 Elementary and 310 Secondary School children were in receipt of this milk. In addition, 43 Secondary scholars were provided with dinners for social reasons.

It is interesting to note that on the 22nd December, 1938, 1884 Elementary School children were receiving milk meals, and 401 were receiving meals through the Local Authority, making a total of 2285 children, or 15·4% of the number on the registers. In addition, 4949 children were receiving milk under the Milk Marketing Board Scheme, making a total of 7234 children, or 48·7% of the number on the registers. To this number must be added a further 312 children attending the Open Air School and receiving 3 meals daily, producing a grand total of 7546 Elementary School children receiving extra nourishment in the form of milk or meals.

(12) Co-operation of Parents, Teachers, Enquiry and Welfare Officers and Voluntary Bodies.

(*a*) *Medical and Dental Inspection.* The co-operation of parents, teachers, etc., has been given as in previous years.

Children who are sent to the School Dental Clinic by the Medical Officers, Head Teachers, School Nurses, etc., have to obtain the sanction, in writing, of the parents before treatment is carried out.

The following table shows the extent to which parents attended the routine medical inspections at the Elementary Schools:—

Group.	No. of Children examined.	Parents present. 1938.		Percentage of Parents present. 1937.
Entrants ...	1861	1789	(96·1%)	94·4
Intermediate ...	1447	1236	(85·4%)	86·7
Leavers ...	1275	962	(75·5%)	75·0
Other Groups ...	2785	2092	(75·1%)	71·4

At the Secondary Schools, of the 607 girls examined, parents were present with 391, or 64·4% ; with boys 278, or 35·1%. For the year 1937 these numbers were 64.5% and 29% respectively.

(*b*) *Following up.* There has been no change in the arrangements for follow up.

(*c*) *Medical and Dental Treatment.* The co-operation of the Head Teachers and the Enquiry and Welfare Officers in sending children to the Clinics, and persuading parents to carry out treatment, etc., still continues.

The Invalid Children's Aid Association and the Inspectors for the Prevention of Cruelty to Children continue to render valuable assistance. Particulars of the cases dealt with by these Voluntary Associations are given on pages 151-153.

There is co-operation between the School Medical Service and the Public Assistance Department and the Unemployment Assistance Board in providing extra nourishment where recommended.

The Chief Constable has also rendered useful assistance on many occasions by permitting the use of the Police Ambulance to convey cases home or to hospital.

(13) **Blind, Deaf, Defective and Epileptic Children.** These are referred to the School Medical Officer from various sources—The Teaching Staff, the Enquiry and Welfare Department and School Nurses; occasionally they are found at the school medical inspections.

An increase in the number of classes for dull or backward children has been in operation during the year.

Blind Children are admitted to Certified Schools on attaining the age of 5 years.

Two girls were admitted to the East Anglian School for Blind and Deaf Children during the year. On 1st January, 1939, 2 boys and 3 girls were on the register at this School.

Deaf and Dumb Children are now admitted to Certified Schools on attaining the age of 5 years.

1 boy and 2 girls were admitted during the year, and the responsibility for 1 girl was transferred from Lowestoft on removal of the parents to Norwich. 2 girls left, 1 being employed in a factory, but the other has not yet been successful in obtaining employment.

4 boys and 6 girls were at the East Anglian School on 1st January, 1939. All children who attend at this school are examined by the School Medical Officer before they return to it after holidays.

The following table shows the number of blind and deaf children for the past 10 years who were on the registers at appropriate residential special schools on 31st December each year :—

Year.	Blind.			Deaf.		
	Boys.	Girls.	Total.	Boys.	Girls.	Total.
1929 ...	7	9	16	5	8	13
1930 ...	4	7	11	6	9	15
1931 ...	4	7	11	8	9	17
1932 ...	5	5	10	7	8	15
1933 ...	5	3	8	9	7	16
1934 ...	4	3	7	7	7	14
1935 ...	4	3	7	5	7	12
1936 ...	3	2	5	5	7	12
1937 ...	2	1	3	3	5	8
1938 ...	2	3	5	4	6	10

Epilepsy. Specially recommended cases are admitted to certified schools on attaining the age of 7 years.

During the year 1 girl was admitted to the Lingfield Epileptic Colony. 1 boy was admitted to Maghull Epileptic Colony but was transferred to an adult home towards the end of the year, having attained the age of 16 years.

Mentally Defectives. These are referred to the School Medical Officer by the Director of Education. Educable feeble-minded children are admitted to the Special Day School, or where the home circumstances are difficult, to a residential special school. Ineducable children are referred to the Mental Treatment Committee.

The ascertainment of these children shows a marked improvement with the institution of routine group intelligence testing—Otis method—of all Elementary School children of the age of 8+ years, which began in the Autumn Term of 1936. The children with an intelligence quotient of below 80 are referred to the School Medical Officer for psychometric examination. This has led to a large increase in the number of cases referred by the Director of Education, and in the number of cases certified as feeble-minded.

The examination for admission to Secondary Schools, at the age of 11+ years, is also used for the ascertainment of suspected mental defectives. The Medical Officers, occasionally at routine or clinic inspections, find suspected cases and draw the attention of the Director of Education to the matter.

Owing to lack of teaching staff, all the children recommended for admission to the Special Day School were unable to attend there, and a number still remain in the ordinary schools.

79 boys and 74 girls were examined for mental deficiency.

The following table shows in Column A the number of children who were examined for the first time for mental deficiency, and in Column B children who had been previously examined *re* mental deficiency and were examined again during the year, together with the recommendations made :—

Recommendation.	Column A.			Column B.		
	Boys.	Girls.	Total.	Boys.	Girls.	Total.
Special Day School ...	23	31	54	3	5	8
Special Residential School ...	3	—	3	—	—	—
Ordinary School	6	2	8	—	—	—
Dull or Backward Class ...	33	24	57	—	—	—
Mental Treatment Committee	1	1	2	3	2	5
To remain at or be admitted to Open Air School ...	7	8	15	—	—	—
Admission to Gorleston School	—	—	—	—	1	1
TOTALS ...	73	66	139	6	8	14

The following table shows the findings in the above cases :—

Diagnosis.	Column A.			Column B.		
	Boys.	Girls.	Total.	Boys.	Girls.	Total.
Feeble-minded	30	38	68	3	5	8
Imbecile	—	—	—	3	2	5
Idiot	1	1	2	—	—	—
Total of certifiable cases ...	31	39	70	6	7	13

Diagnosis.	Column A.			Column B.		
	Boys.	Girls.	Total.	Boys.	Girls.	Total.
Dull or Backward ...	35	24	59	—	—	—
Borderline Cases	4	1	5	—	—	—
Not Mentally Backward ...	3	2	5	—	1	1
Total of non-certifiable cases	42	27	69	—	1	1

In addition to the above, 6 boys and 5 girls, who were already attending Colman Road Special School, were brought forward for special examination for various reasons, e.g., unmanageable, applications to leave school, etc. Recommendations were made as follows:

	Boys.	Girls.	Total.
Referred to Mental Treatment Committee	6	2	8
To remain at Special School	—	3	3

(*a*) *Colman Road Open Air School (Special Department).* During the year 20 boys and 29 girls were admitted to, and 9 boys and 5 girls left, this school. Of those leaving, 9 were notified to the Mental Treatment Committee, 1 boy was admitted to the Public Assistance Institution and 1 boy to Wallingford Training Colony, 2 children left the city, and 1 girl is helping her mother at home.

42 boys and 47 girls (including 3 boys and 3 girls recorded under the heading of "Children suffering from multiple defects" on page 204) were on the register on 1st January, 1939. The average attendance was 73·6. The Medical Inspector paid 11 visits to the school.

(*b*) *Residential Special Schools.* During the year 2 girls and 1 boy have been admitted to Residential Special Schools. 1 boy left the Colchester Institution and was transferred to the care of the Mental Treatment Committee.

Open Air School.

(*a*) *Mentally Defectives.* These are accommodated at the Open Air School in a Special Department and are referred to above. The number attending increased from 54 in 1937 to 89 in 1938.

(*b*) *Physically Defectives.* The general arrangements at this school remain the same as reported in previous years.

The standard of the milk supplied was "Accredited." During the year 21 cwt. of malt and cod liver oil and 16 gallons of Parrish's Chemical Food were ordered for the children of this school.

The general arrangements for the admission of children to the Open Air School remain the same; the average attendance for the year was 184·5.

At the beginning of the year there were 110 children attending the school under Dr. Riddel's supervision, and during the 12 months 53 were admitted, including 6 re-admissions.

62 children were discharged, of whom 4 were withdrawn by parents, 29 discharged as fit for ordinary schools, and 15 left on attaining the age of 14 years or over, 6 left the city, 6 were transferred to the Special Department, 1 to the Junior Art School, and 1 to the Home Teacher, being unfit to continue attendance at school.

The following table shows the number of children under Dr. Riddel's supervision, who were discharged during the year :—

Boys.

Disease.	Total Discharged.	Cured.	Improved.	No Change.
Malnutrition	11	5	6	—
Debility	12	10	2	—
Bronchitis	3	1	1	1
Defective Vision ...	2	—	—	2
Miscellaneous	4	1	2	1
Totals ...	32	17	11	4

Girls.

Disease.	Total Discharged.	Cured.	Improved.	No Change.
Malnutrition	11	6	5	—
Debility	11	5	6	—
Defective Vision ...	5	1	—	4
Miscellaneous	3	2	1	—
Totals ...	30	14	12	4

Children remaining were suffering from the following disabilities :—

Disease.	Boys.	Girls.
Malnutrition	28	14
Debility	20	15
Bronchitis	—	3
Defective Vision	3	3
Paralysis	3	2
Heart Disease	2	—
Deformities	2	—
Epilepsy	3	—
Miscellaneous	2	1
Totals	63*	38

*Includes two certified mental defectives not yet transferred to the special department.

Of the boys who were discharged on attaining school leaving age, 1 is employed in the boot and shoe trade, 1 in an engineering works, 2 are unemployed, 1 has left the city and the present address of 1 other is unknown.

Of the girls who were similarly discharged, 5 are employed in the boot and shoe trade, 2 are unemployed, 1 has left the city and 1 has been admitted to the East Anglian School for the Blind, Gorleston.

The health of 2 of the boys was reported to be "satisfactory" and 2 as "fairly well."

The health of 3 of the girls was reported to be "satisfactory", 2 as "fairly well", 2 are attending Hospital for orthopædic treatment, and 1 has very defective vision.

During the year 81 boys and 62 girls came under the supervision of Dr. Boston at this school. 25 boys and 31 girls were admitted. 10 boys and 8 girls left at 14 years of age or over. 12 boys and 8 girls were certified fit to attend ordinary school. 1 girl left at the parents' request. 1 boy and 1 girl left the city. 2 boys were transferred to Hospitals and 1 girl left on account of severe illness and 1 boy was transferred to the Special School.

55 boys and 43 girls were attending the school on the 1st January, 1939, under the supervision of Dr. Boston.

The following is a summary of the cases admitted to the school on Dr. Boston's recommendation during the year 1938:—

	Boys.	Girls.
Debility with TB. History	12	10
,, (Anæmia, Malnutrition, Rickets, etc.)	7	11
TB. Glands (Neck)	2	5
TB. Bones and Joints (healed or arrested)	1	2
Hilar and Suspected TB.	2	—
Lupus (Healed)	—	1
Non-Tuberculous Disease of Lungs ...	1	2
Totals ...	25	31

The following cases were discharged during the year:—

	Boys.	Girls.
Debility with TB. History	10	6
,, (Anæmia, Malnutrition, etc.) ...	4	7
TB. Glands (Neck)	6	3
TB. Bones and Joints (healed) ...	2	—
Hilar and Suspected TB.	1	1
Lupus (Healed)	—	1
Non-Tuberculous Disease of Lungs ...	2	1
Asthma	1	—
TOTALS ...	26	19

The following cases remained on the register on 1st January, 1939:—

	Boys.	Girls.
Debility with TB. History	26	18
,, (Anæmia, Malnutrition, etc.)	10	10
TB. Glands (Neck)	7	7
TB. Bones and Joints (healed or arrested)	3	3
Hilar and Suspected TB.	4	2
TB. Abdomen	1	—
Lupus (arrested)	—	1
Non-Tuberculous Disease of Lungs ...	4	2
TOTALS ...	55	43

Of the boys who were discharged 6 are working in factories or engineering shops, 2 are unemployed, 1 is attending the Norfolk & Norwich Hospital for treatment, and the other has moved, the present whereabouts being unknown.

Of the girls who were similarly discharged, 6 are working in factories, 1 is a domestic servant, and 1 returned to the school early in 1939.

The health of all of the above-mentioned children is reported as "good" excepting in the case of the boy who is attending hospital and the boy not traced.

Child Guidance. 1 girl was sent to the London Child Guidance Clinic during the year for examination and advice. 1 other girl who was attending the Child Guidance Clinic at Islington for treatment was discharged in August, 1938, and her conduct has been satisfactory since her return to Norwich.

Although there is no special Child Guidance Clinic in Norwich, cases are occasionally referred by teachers or parents for advice with respect to difficult behaviour.

The following two cases are quoted as examples:—

(*a*) In the case of a boy attending an Infant School the complaint of the teacher was that the boy kicked and picked children in the playground, although previously his behaviour had been satisfactory. When this case was investigated it was found that the behaviour commenced after the birth of a brother and the conduct was attributed to the transfer of affection from this boy, who was an only child at the time when the new baby arrived. When this was explained to the mother and the suggestion made that more "fuss" should be made of this boy, the conduct complained of ceased.

(*b*) The other case was of a girl, who was referred by the teacher because she would take no part in the games in the playground with other girls and would not mix with them, and who seemed to have a very unhappy disposition. On investigating this case it was found that the child suffered from nocturnal enuresis and had done so each night since birth. Both her mother and the child were extremely clean in habits and this enuresis worried the child because she thought she was different from other children. It was pointed out to the parent of the child that enuresis was quite a common ailment and occurred even in the cleanest families, in highly strung cases. The child was told not to brood over this but to make little of it and be rewarded if she were able to pass the night without this happening. Within a short time, it was reported to have diminished and was happening only occasionally, with marked improvement in the child's outlook on life.

Those *physically defective* children who, in consequence of their disability, have to be taught by the Visiting Teacher, have been examined during the year by a Medical Officer. At the end of the year 13 boys and 6 girls were being taught by this Teacher.

(14) **Full-time Courses of Higher Education for Blind, Deaf, Defective and Epileptic Students.** Suitable cases are referred to the Director of Education or are already under his supervision by attending an appropriate special school until attaining the age of 16 years. The cases are considered by the Higher Education Committee and sent to the most suitable Institution.

4 students were sent to the Norwich Institution for the Blind for training. 1 person completed his training at the Norwich Institution and was transferred to the workshops at that Institution. At the end of the year 9 students were receiving training at this Institution, 2 in mat making, 1 brush making, 3 machine knitting, and 3 in basket making.

At the end of the year there were no epileptics, but there were 3 cripples under the care of the Higher Education Committee.

15. **Nursery Schools.** During the year, Nursery Classes accommodating 200 children were commenced in three schools—two being situated at schools on the Housing Estates and one at a school serving a poor district near the centre of the city, i.e., at Cavell, Catton Grove and Bignold Schools.

At present, there is no Nursery School but the one referred to in my last annual report will be opened in 1939.

School Nurses visit the Nursery classes once weekly, and 44 visits were made during the year, 2707 children being examined.

These children are medically inspected annually, in accordance with the recommendation of the Board of Education, and a Medical Officer visits the classes each term.

(16) Secondary and Junior Technical Schools.

Medical Inspection. There are two Secondary Schools—one for boys and one for girls—a Junior Technical School for boys, a Junior Art School and a Junior Commercial School (both for boys and girls). At the end of the year 586 boys and 618 girls were attending the Secondary Schools; 154 boys were attending the Junior Technical School; 55 boys and girls were attending the Junior Art School; and 120 boys and girls were attending the Junior Commercial School. As far as possible, efforts are made to examine these scholars during the first term after their admission to school and in each subsequent year during the period of their attendance after they attain the age of 12 years. The arrangements for carrying out medical inspection are similar to those which obtain in the Elementary Schools. It is not possible with the existing staff of Dental Officers to conduct inspections in these schools, but children are referred by the Medical Officers and the Head Teachers as needing dental treatment.

Following-up and Medical Treatment. The arrangements for the following-up of defects in children attending Elementary Schools also apply to those attending Secondary Schools. The Authority now provides the same treatment for Secondary School cases as that provided for Elementary School children.

FINDINGS OF MEDICAL INSPECTION.

Defect or Disease.	Routine Inspections.	"Specials" at School or Clinic.	Total Defects.	Referred for Treatment.
Uncleanliness :				
Head	—	1	1	1
Body	—	—	—	—
Minor Injuries, Septic Sores, etc.	3	46	49	49
Tonsils and Adenoids ...	6	—	6	—
Other Diseases of the Nose and Throat	6	30	36	35
Pulmonary Tuberculosis :				
Definite	—	—	—	—
Suspected	—	—	—	—
Non-Pulmonary Tuberculosis	1	—	1	1
Skin Diseases	18	33	51	50
External Eye Diseases ...	4	16	20	19
Vision and Squint	149	62	211	192
Ear Disease and Hearing ...	11	23	34	30
Dental Diseases	174	18	192	190
Crippling Defects, Deformities, etc.	154	22	176	165
Malnutrition	67	9	76	75
Enlarged Cervical Glands (Non-Tuberculous) ...	1	2	3	—
Defective Speech	3	—	3	2
Heart and Circulatory Diseases	25	8	33	32
Bronchitis	2	1	3	2
Other Non-Tuberculous Diseases of the Lungs ...	2	3	5	4
Diseases of the Nervous System	4	5	9	7
Other Defects and Diseases ...	38	59	97	80

Medical Treatment.

Defect or Disease	Referred for Treatment during 1938 and Treated	Cured	Referred for Treatment previously to but treated during 1938	Cured	Total Defects Treated	Total Defects Cured
Minor Injuries, Septic Sores, etc.	46	45	3	3	49	48
Tonsils and Adenoids ...	—	—	—	—	—	—
Other Diseases of the Nose and Throat ...	27	25	1	—	28	25
Pulmonary Tuberculosis:						
Definite	—	—	—	—	—	—
Suspected	—	—	—	—	—	—
Non-Pulmonary Tuberculosis	1	—	7	—	8	—
Skin Diseases ...	38	28	11	6	49	34
External Eye Diseases ...	17	12	7	4	24	16
Vision and Squint ...	172	113 (Glasses prescribed)	7	5 (Glasses prescribed)	179	118 (Glasses prescribed)
Ear Disease and Hearing	20	14	6	2	26	16
Dental Diseases ...	158	158	44	44	202	202
Crippling Defects, Deformities, etc. ...	99	1	83	10	182	11
Malnutrition	46	2	102	35	148	37
Enlarged Cervical Glands	1	—	1	1	2	1
Bronchitis	2	1	5	2	7	3
Other Non-Tuberculous Diseases of the Lungs	2	—	4	—	6	—
Defective Speech ...	—	—	3	2	3	2
Heart and Circulatory Diseases	18	—	17	4	35	4
Diseases of the Nervous System	5	1	10	3	15	4
Other Defects & Diseases	52	24	72	22	124	46

(17) **Parents' Payments.** There has been no change during the year in the arrangements with respect to payment for treatment by parents.

(18) **Health Education.** The Handbook of suggestions on Health Education is used by the teachers in the schools. Leaflets on the care of the teeth, issued by the Dental Board of the United Kingdom, are distributed to children when they leave school. During the year the Committee accepted the offer of the Dental Board to send free of charge a dental exhibit, accompanied by a trained demonstrator, to be shown to the older scholars.

(19) **Special Inquiries.** (*a*) In July, 1938, Head Teachers of Elementary Schools were asked to submit names of children who, in their opinion, would benefit from receiving meals at school.

771 names were submitted, out of which 672 were examined, 16 were already in receipt of meals, 24 left school before arrangements for their examination could be made, and 59 refused to attend for examination.

The following findings were made by the School Medical Staff:—

Nutrition.	Number.
A (excellent)	16
B (normal)	202
C (slightly subnormal)	443
D (bad)	2
Unclassified (Debility, etc.)	9
Total	672

The following table shows the recommendations made and the result:—

Recommendation.	Number.	No. supplied.
Meals at school	207	131
Milk at school	128	116
Open Air School	11	8
Already on milk—no change	136	136
No recommendation ...	190	—
	672	391

76 cases refused meals, 12 cases refused milk, and 3 cases refused Open Air School treatment.

It will be noticed that according to the Medical Officers only 66 per cent. of those examined were malnourished, and it is probable that many of the children were referred by the Head Teachers for social and economic reasons.

Of the total number referred 407 either were already receiving or were granted extra nourishment by the Local Authority.

(*b*) A "strike" by the parents of the children from one of the outlying new Housing Estates occurred towards the end of the

year, the parents petitioning that all their children should be granted bus travelling facilities by the Local Authority to and from school in the mornings and evenings as well as at mid-day, similar to the arrangements made for the younger children. The parents alleged that walking to school had a detrimental effect on the health of the children and *inter alia* advanced this as a reason for buses, so a survey of the schools involved was commenced at the end of the year. This survey continued into 1939, and a full report of the findings will be published in that report. The Education Committee, however, agreed to the children travelling by bus in the mornings and evenings instead of mid-day if the parents so wished, and the strike ceased.

(20) **Miscellaneous.** The quarterly systematic measuring and weighing, by the Head Teachers, of all school children continued during the year.

In addition to the 771 children referred to on page 197, 25 children, who were suspected by the teachers to be malnourished, were brought forward for examination by the School Medical Officers. Some of these cases were selected as being under weight when being weighed under the systematic weighing and measuring arrangements. 10 of these children were classified as Nutrition "B," 13 as Nutrition "C," and 2 as Nutrition "D."

Children and Young Persons Act, 1933. During the year 9 boys were medically examined under the above Act at the request of the magistrates.

National Health Insurance (Juvenile Contributors and Young Persons) Act, 1937. During the year a few private practitioners in the city made regular use of the provision of this Act by asking for information with respect to the medical history of children who had left school and who were between the ages of 14 and 18 years, but, up to the present, the use is not general.

Examination of Teachers and Caretakers. 25 newly appointed teachers were examined medically during the year. In addition, 2 teachers were examined following prolonged absence owing to sickness, and 3 teachers were examined prior to going abroad.

1 newly appointed school caretaker was also examined.

Instruction in Mothercraft. During the year arrangements were made for 6 groups of girls (2 groups each term), comprising 72 scholars, from the Dowson Senior Girls' School, to attend at one of the Infant Welfare Centres to receive instruction in Mothercraft and personal hygiene from the Medical Officer in attendance there. The instruction given was greatly appreciated.

9 children were examined medically during the year in connection with applications for Entertainment Licences.

ELEMENTARY SCHOOLS.

TABLE 1.—RETURN OF MEDICAL INSPECTIONS.

A.—ROUTINE MEDICAL INSPECTIONS.

Number of Code Group Inspections—	
Entrants	1861
Intermediate (2nd age group) ...	1447
Leavers (3rd ,, ,,) ...	1275
Total ...	4583
Number of other Routine Inspections	2785
Total ...	7368

B.—OTHER INSPECTIONS.

Number of Special Inspections	6883
,, ,, Re-inspections	25595
Total ...	32478

TABLE 2.

A.—RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR ENDED 31ST DECEMBER, 1938.

Defect or Disease.	Routine Inspections. Number of Defects.		Special Inspections. Number of Defects.	
	Requiring Treatment.	Requiring Observation but not Treatment.	Requiring Treatment.	Requiring Observation but not Treatment.
(1)	(2)	(3)	(4)	(5)
Malnutrition ...	522	50	622	5
Uncleanliness :				
Head	7	—	329	—
Body	—	—	—	—
SKIN—				
Ringworm :				
Scalp	—	—	1	—
Body	—	—	8	—
Scabies	5	—	17	—
Impetigo	5	—	227	—
Other Diseases (Non-Tuberculous) ...	43	10	607	21
Minor Injuries, Bruises, etc. ...	3	—	559	3
Septic Sores ...	7	—	818	—

TABLE 2—*continued.*

Defect or Disease.	Routine Inspections. Number of Defects.		Special Inspections. Number of Defects.	
	Requiring Treatment.	Requiring Observation but not Treatment.	Requiring Treatment.	Requiring Observation but not Treatment.
(1)	(2)	(3)	(4)	(5)
EYE—				
Blepharitis ...	10	1	90	7
Conjunctivitis ...	1	—	111	—
Keratitis	—	—	1	—
Corneal Opacities ...	—	—	1	—
Corneal Ulcer ...	—	—	5	—
Defective Vision ...	243	18	396	8
Squint	33	11	70	5
Other Conditions ...	5	—	109	3
EAR—				
Defective Hearing ...	18	2	16	20
Otitis Media ...	19	3	158	7
Other Ear Diseases	11	1	115	10
NOSE AND THROAT—				
Chronic Tonsillitis only	30	134	39	108
Adenoids	23	17	10	20
Chronic Tonsillitis and Adenoids ...	36	33	105	35
Other Conditions ...	44	29	575	38
Enlarged Cervical Glands (Non-Tuberculous)... ...	12	14	123	65
Defective Speech ...	12	12	17	13
TEETH—				
Dental Diseases ...	35	6	191	43
HEART & CIRCULATION—				
Heart Disease :				
Organic ...	8	14	—	—
Functional ...	23	52	4	6
Anæmia	83	8	190	1
LUNGS—				
Bronchitis ...	29	20	75	3
Other Non-Tuberculous Diseases ...	11	14	74	10

TABLE 2—*continued.*

Defect or Disease.	Routine Inspections. Number of Defects.		Special Inspections. Number of Defects.	
	Requiring Treatment.	Requiring Observation but not Treatment.	Requiring Treatment.	Requiring Observation but not Treatment.
(1)	(2)	(3)	(4)	(5)
TUBERCULOSIS—				
Pulmonary :				
Definite ...	—	—	1	—
Suspected ...	—	—	—	—
Non-Pulmonary :				
Glands	1	—	9	—
Spine	—	—	—	—
Hip	—	—	—	—
Other Bones and Joints ...	—	—	—	—
Skin	—	—	—	—
Other Forms ...	—	—	1	—
NERVOUS SYSTEM—				
Epilepsy	5	3	16	3
Chorea	9	4	17	7
Other Conditions ...	20	9	90	13
DEFORMITIES—				
Rickets	91	26	18	5
Spinal Curvature ...	25	9	26	9
Other Forms ...	129	33	106	10
Other Defects and Diseases	181	66	1443	134

B.—Classification of the NUTRITION OF CHILDREN inspected during the year in the Routine Age Groups.

Age-groups.	No. of Children Inspected.	A. (Excellent.)		B. (Normal.)		C. (Slightly subnormal.)		D. (Bad.)	
		No.	%	No.	%	No.	%	No.	%
Entrants ...	1861	192	10 3	1470	79.0	198	10.6	1	0.1
Second Age-group	1447	166	11.5	1034	71.5	245	16.9	2	0.1
Third Age-group	1275	172	13.5	877	68.8	225	17.6	1	0.1
Other Routine Inspections ...	2785	407	14.6	2014	72.3	362	13.0	2	0.1
TOTAL ...	7368	937	12.7	5395	73.2	1030	14.0	6	0.1

C.—(*a*) Number of INDIVIDUAL CHILDREN found at Routine Medical Inspection to require treatment (excluding uncleanliness and Dental Diseases) 1487

Group. (1)	Number of Children. Inspected. (2)	Found to require Treatment. (3)	Percentage of Children found to require Treatment. (4)
CODE GROUPS—			
Entrants	1861	476	25.6
Intermediate (2nd age Group)	1447	259	17.9
Leavers (3rd ,, ,,)	1275	295	23.1
TOTAL (CODE GROUPS) ...	4583	1030	22.5
Other Routine Inspections ...	2785	457	16.4

C.—(*b*) Number of INDIVIDUAL CHILDREN found at Routine Medical Inspection to require treatment (excluding uncleanliness and Dental Diseases).

(NOTE—No individual child is counted more than once in any column of this table.)

GROUP. (1)	For Defective Vision (excluding Squint). (2)	For all other conditions recorded in Table II. (excluding Malnutrition). (3)	Total. (4)	Malnutrition. (5)	Grand Total. (6)
CODE GROUPS—					
Entrants	11	347	350	166	476
Second Age Group ...	48	145	185	87	259
Third Age Group ...	69	147	208	122	295
TOTAL (CODE GROUPS)	128	639	743	375	1030
Other Routine Inspections	115	233	330	147	457
GRAND TOTAL ...	243	872	1073	522	1487

TABLE 3.—RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA.

			Boys.	Girls.	Total.
	Children with multiple defects.	At the Special Day School for Mentally Defectives	3	3	6
		At no School or Institution ...	—	—	—
		At Certified School for Blind (Gorleston)	—	1	1
Blind (including partially blind).	(i.) Children who are so blind that they can only be appropriately taught in a School for blind children.	At Certified Schools for the Blind	2	2	4
		At Public Elementary Schools ...	—	—	—
		At other Institutions	—	—	—
		At no School or Institution ...	—	—	—
	(ii.) Children who have such power of vision that they can only be appropriately taught in a School for the partially blind.	At Certified Schools for the Blind or partially Blind	—	—	—
		At Public Elementary Schools ...	—	1	1‡
		At other Institutions	3	3	6†
		At no School or Institution ...	—	—	—
Deaf (including deaf and dumb and partially deaf).	(i.) Children who are so deaf that they can only be appropriately taught in a School for the deaf.	At Certified Schools for the Deaf ...	4	6	10
		At Public Elementary Schools ...	—	—	—
		At other Institutions	—	—	—
		At no School or Institution ...	—	—	—
	(ii.) Children who can only be appropriately taught in a School for the partially deaf.	At Certified Schools for the Deaf or Partially Deaf	—	—	—
		At Public Elementary Schools ...	3	—	3
		At other Institutions	—	1	1†
		At no School or Institution ...	—	—	—

†At Certified Day Open Air School.

‡In addition there was 1 girl at the Junior Art School.

TABLE 3—*continued.*

			Boys.	Girls.	Total.
Mentally Defective.	Feeble-minded.	At Certified Schools for Mentally Defective Children	40	46	86
		At Public Elementary Schools ...	6	9	15
		At other Institutions	4	1	5†
		At no School or Institution ...	—	2	2§
	Notified to the Local Mental Deficiency Authority during the year.	(i.) Children incapable of receiving benefit or further benefit from instruction in a Special School :—			
		(*a*) Idiots	1	1	2
		(*b*) Imbeciles	6	3	9
		(*c*) Others	2	—	2
		(ii.) Children unable to be instructed in a Special School without detriment to the interests of other children :—			
		(*a*) Moral Defectives ...	—	—	—
		(*b*) Others	—	—	—
		Feeble-minded Children notified on leaving a Special School on or before attaining the age of 16 ...	7	2	9

†I boy and 1 girl at Private Schools, 1 boy in the Remand Home, 2 boys at the Certified Day Open Air School.

§Receiving private tuition.

TABLE 3—*continued.*

			Boys.	Girls.	Total
Mentally Defective —*continued.*		Feeble-minded Children notified under Article 3 of the 1928 Regulations, i.e., "Special Circumstances" cases	—	—	—
		Children who, in addition to being mentally defective, were blind or deaf	—	—	—
Epileptics.	Children suffering from severe epilepsy.	At Certified Special Schools ...	—	1	1
		At Public Elementary Schools ...	—	—	—
		At other Institutions	—	—	—
		At no School or Institution ...	—	1	1
Physically Defective.	Children suffering from pulmonary tuberculosis (including pleura and intrathoracic glands).	At Certified Special Schools ...	—	—	—
		At Public Elementary Schools ...	—	—	—
		At other Institutions	—	—	—
		At no School or Institution ...	—	—	—

TABLE 3—*continued.*

			Boys.	Girls.	Total.
Physically Defective —*continued.*	Children suffering from non-pulmonary tuberculosis.	At Certified Special Schools ...	13	13	26‡
		At Public Elementary Schools ...	—	—	—
		At other Institutions	1	—	1
		At no School or Institution ...	2	2	4*
	Delicate Children, i.e., all children (except those included in other groups) whose general health renders it desirable that they should be specially selected for admission to an Open Air School.	At Certified Special Schools ...	95	64	159§
		At Public Elementary Schools ...	82	108	190‖¶
		At other Institutions	—	—	—
		At no School or Institution ...	1	1	2*
	Crippled Children (other than those diagnosed as tuberculous and in need of treatment for that disease) who are suffering from a degree of crippling sufficiently severe to interfere materially with a child's normal mode of life.	At Certified Special Schools ...	6	3	9†
		At Public Elementary Schools ...	—	—	—
		At other Institutions	—	—	—
		At no School or Institution ...	6	2	8*

‡Includes 11 boys and 11 girls at the Certified Day Open Air School.
§At the Certified Day Open Air School.
‖Includes 77 boys and 105 girls suffering from Rheumatic affections.
†Includes 5 boys and 2 girls at the Certified Day Open Air School.
¶In addition, 6 girls at Secondary Schools.

TABLE 3—*continued.*

			Boys	Girls	Total
Physically Defective —*continued.*	Children with heart disease, i.e., children whose defect is so severe as to necessitate the provision of educational facilities other than those of the public Elementary School.	At Certified Special Schools ...	2	—	2§
		At Public Elementary Schools ...	—	1	1
		At other Institutions	—	—	—
		At no School or Institution ...	4	1	5*

§At the Certified Day Open Air School.

*Being taught by the Visiting Teacher.

TABLE 4.—RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31ST DECEMBER, 1938.

GROUP 1.—MINOR AILMENTS (excluding Uncleanliness, for which see Group 6).

Defect or Disease. (1)	Number of Defects treated, or under treatment during the year. Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
SKIN—			
Ringworm—Scalp { X-ray Treatment	—	—	—
Ringworm—Scalp { Other do.	2	—	2
Ringworm—Body ...	7	1	8
Scabies	23	—	23
Impetigo	259	5	264
Other Skin Diseases ...	634	120	754
MINOR EYE DEFECTS ... (External and other, but excluding cases falling in Group 2).	317	45	362
MINOR EAR DEFECTS ...	369	66	435
MISCELLANEOUS— (e.g., minor injuries, bruises, sores, chilblains, etc.) ...	1407	33	1440
TOTAL ...	3018	270	3288

GROUP 2.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group 1).

Defect or Disease. (1)	Number of Defects dealt with. Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Errors of Refraction (including Squint). (Operations for Squint are recorded separately in the body of the Report)	772	1	773
Other Defect or Disease of the Eyes (excluding those recorded in Group 1) ...	3	4	7
TOTAL ...	775	5	780

Total number of children for whom spectacles were prescribed :—

(*a*) Under the Authority's Scheme ... 380

(*b*) Otherwise 1

Total number of children who obtained spectacles :—

(*a*) Under the Authority's Scheme ... 386

(*b*) Otherwise 2

Group 3.—Treatment of Defects of Nose and Throat.

Number of Defects.

Received Operative Treatment.												Received other forms of Treatment.	Total number Treated.
Under the Authority's Scheme in Clinic or Hospital. (1)				By Private Practitioner or Hospital apart from the Authority's Scheme. (2)				Total (3)				(4)	(5)
(i.)	(ii.)	(iii.)	(iv.)	(i.)	(ii.)	(iii.)	(iv).	(i.)	(ii.)	(iii.)	(iv.)		
2	5	201	2	6	1	2	—	8	6	203	2	653	872

(i.) Tonsils only; (ii.) Adenoids only; (iii.) Tonsils and Adenoids; (iv.) Other Defects of the Nose and Throat.

Group 4.—Orthopædic and Postural Defects.

	Under Authority's Scheme. (1)			Otherwise. (2)			Total number treated.
	Residential treatment with education. (i.)	Residential treatment without education. (ii.)	Non-Residential treatment at an Orthopædic Clinic. (iii.)	Residential treatment with education. (i.)	Residential treatment without education. (ii.)	Non-Residential treatment at an Orthopædic Clinic. (iii.)	
No. of children treated...	2	30	662†	—	—	—	664†

†Including 109 cases attending Clinic for observation.

Group 5.—Dental Defects.

(1) Number of children who were:—

(*a*) Inspected by the Dentists:—

Routine Age Groups	Aged 5 years	...	493	Total ...	4873
	,, 6 ,,	...	427		
	,, 7 ,,	...	459		
	,, 8 ,,	...	482		
	,, 9 ,,	...	522		
	,, 10 ,,	...	541		
	,, 11 ,,	...	621		
	,, 12 ,,	...	615		
	,, 13 ,,	...	598		
	,, 14 ,,	...	114		
	,, 15 ,,	...	1		
Specials		...	...	...	2249
			Grand Total	...	7122

(*b*) Found to require treatment 5970

(*c*) Actually treated 4523

(*d*) Re-treated during the year as the result of periodical examination [included in (*c*)]... 2285

(2)	Half-days devoted to	Inspection	37	Total	1401
		Treatment	1364		
(3)	Attendances made by children for treatment			...	9898
(4)	Fillings ...	Permanent Teeth	6966	Total	6973
		Temporary Teeth	7		
(5)	Extractions ...	Permanent Teeth	1240	Total	5709
		Temporary Teeth	4469		
(6)	Administration of general anæsthetics for extractions				2199
(7)	Other Operations	Permanent Teeth	2252	Total	2252
		Temporary Teeth	Nil		

Group 6.—Uncleanliness and Verminous Conditions.

(1) Average number of visits per school (department) made during the year by the School Nurses ... 2.5

(2) Total number of examinations of children made in the Schools by School Nurses 31879

(3) Number of individual children found unclean ... 281

(4) Number of children cleansed under arrangements made by the Local Education Authority :—

(*a*)	Voluntarily	38
(*b*)	Compulsorily	121

(5) Number of cases in which legal proceedings were taken :—

(*a*)	Under the Education Act, 1921	Nil
(*b*)	*Under School Attendance Byelaws* ...	Nil
(*c*)	Under the Norwich Corporation Act, 1933 ...	15

SECONDARY SCHOOLS.

TABLE 1.—NUMBER OF CHILDREN INSPECTED DURING THE YEAR ENDED 31ST DECEMBER, 1938.

A.—ROUTINE MEDICAL INSPECTION.

Age	10	11	12	13	14	15	16	17	18	19	Grand Total
Boys	1	75	114	172	212	157	47	10	3	—	791
Girls	2	78	51	78	143	104	92	32	23	4	607
Totals	3	153	165	250	355	261	139	42	26	4	1398

B.—OTHER INSPECTIONS.

	Number of Special Inspections.	Number of Re-inspections.
Boys ...	127	475
Girls ...	165	498
TOTALS ...	292	973

Table 2.

A.—Return of Defects found by Medical Inspection in the Year ended 31st December, 1938.

Defect or Disease. (1)	Routine Inspections. Number of Defects. Requiring Treatment (2)	Routine Inspections. Number of Defects. Requiring Observation but not Treatment. (3)	Special Inspections. Number of Defects. Requiring Treatment. (4)	Special Inspections. Number of Defects. Requiring Observation but not Treatment. (5)
Malnutrition ...	66	1	9	—
Uncleanliness :				
Head	—	—	1	—
Body	—	—	—	—
Skin—				
Ringworm :				
Scalp	—	—	—	—
Body	—	—	—	—
Scabies	—	—	1	—
Impetigo	—	—	1	—
Other Diseases (Non-Tuberculous) ...	17	1	31	—
Minor Injuries, Bruises, etc. ...	1	—	32	—
Septic Sores ...	2	—	14	—
Eye—				
Blepharitis ...	2	1	5	—
Conjunctivitis ...	—	—	5	—
Keratitis	—	—	—	—
Corneal Opacities ...	—	—	—	—
Corneal Ulcer ...	—	—	—	—
Defective Vision ...	127	15	59	3
Squint	6	1	—	—
Other Conditions ...	1	—	6	—
Ear—				
Defective Hearing ...	2	—	3	3
Otitis Media ...	2	—	4	—
Other Ear Diseases	6	1	13	—
Nose and Throat—				
Chronic Tonsillitis only	—	4	—	—
Adenoids	—	2	—	—
Chronic Tonsillitis and Adenoids ...	—	—	—	—
Other Conditions ...	6	—	29	1

TABLE 2—*continued.*

Defect or Disease. (1)	Routine Inspections. Number of Defects. Requiring Treatment. (2)	Routine Inspections. Number of Defects. Requiring Observation but not Treatment. (3)	Special Inspections. Number of Defects. Requiring Treatment. (4)	Special Inspections. Number of Defects. Requiring Observation but not Treatment. (5)
Enlarged Cervical Glands (Non-Tuberculous)	—	1	—	2
Defective Speech ...	2	1	—	—
TEETH—				
Dental Diseases ...	174	—	16	2
HEART & CIRCULATION—				
Heart Disease :				
Organic ...	—	—	2	—
Functional ...	3	—	2	1
Anæmia	22	—	3	—
LUNGS—				
Bronchitis ...	1	1	1	—
Other Non-Tuberculous Diseases ...	2	—	2	1
TUBERCULOSIS—				
Pulmonary :				
Definite ...	—	—	—	—
Suspected ...	—	—	—	—
Non-Pulmonary :				
Glands	1	—	—	—
Spine	—	—	—	—
Hip	—	—	—	—
Other Bones and Joints ...	—	—	—	—
Skin	—	—	—	—
Other Forms ...	—	—	—	—
NERVOUS SYSTEM—				
Epilepsy	—	—	—	—
Chorea	—	—	2	—
Other Conditions ...	3	1	2	1
DEFORMITIES—				
Rickets	3	—	1	2
Spinal Curvature ...	65	3	6	2
Other Forms ...	79	4	11	—
Other Defects and Diseases	34	4	46	13

B.—Classification of the NUTRITION OF CHILDREN Inspected during the Year.

	No. of Children Inspected.	A. (Excellent.)		B. (Normal.)		C. (Slightly subnormal.)		D. (Bad.)	
		No.	%	No.	%	No.	%	No.	%
Boys ...	791	163	20.6	481	60.8	147	18.6	—	0.0
Girls ...	607	50	8.2	498	82.1	59	9.7	—	0.0
TOTAL ...	1398	213	15.3	979	70.0	206	14.7	—	0.0

C.—Number of INDIVIDUAL CHILDREN found at Routine Medical Inspection to require Treatment (excluding Uncleanliness and Dental Diseases) ... 373

GROUP. (1)	For Defective Vision (excluding Squint). (2)	For all other conditions in Table II. (excluding Malnutrition). (3)	Total. (4)	Malnutrition. (5)	Grand Total. (6)
Boys ...	76	149	190	32	216
Girls ...	51	92	138	34	157
TOTAL ...	127	241	328	66	373

D.—Number of INDIVIDUAL CHILDREN in "C" who received Treatment (excluding Specials, Uncleanliness and Dental Diseases) 285

TABLE 4.—RETURN OF DEFECTS TREATED DURING THE YEAR ENDED 31ST DECEMBER, 1938.

GROUP 1.—MINOR AILMENTS (excluding Uncleanliness, for which see Group 6).

Defect or Disease. (1)	Number of Defects treated or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
SKIN—			
Ringworm—Scalp ...	—	—	—
,, Body ...	—	—	—
Scabies	1	—	1
Impetigo	2	—	2
Other Skin Diseases ...	34	12	46
MINOR EYE DEFECTS (External and other, but excluding cases falling in Group 2)	21	3	24
MINOR EAR DEFECTS ...	20	3	23
MISCELLANEOUS— (e.g., minor injuries, bruises, sores, chilblains, etc.) ...	43	6	49
TOTAL ...	121	24	145

GROUP 2.—DEFECTIVE VISION AND SQUINT (excluding Minor Eye Defects treated as Minor Ailments—Group 1).

Defect or Disease. (1)	Number of Defects dealt with.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Errors of Refraction (including Squint). (Operations for Squint are recorded separately in the body of the Report)	178	1	179
Other Defect or Disease of the eyes (excluding those recorded in Group 1)	—	—	—
TOTAL ...	178	1	179

Total number of children for whom spectacles were prescribed :—

(*a*) Under the Authority's Scheme ... 118
(*b*) Otherwise Nil

Total number of children who obtained spectacles :—

(*a*) Under the Authority's Scheme ... 104
(*b*) Otherwise Nil

GROUP 3.—TREATMENT OF DEFECTS OF NOSE AND THROAT.
NUMBER OF DEFECTS.

Received Operative Treatment.												Received other forms of Treatment.	Total number Treated.
Under the Authority's Scheme in Clinic or Hospital. (1)				By Private Practitioner or Hospital apart from the Authority's Scheme. (2)				Total. (3)				(4)	(5)
(i.)	(ii.)	(iii.)	(iv.)	(i.)	(ii.)	(iii.)	(iv.)	(i.)	(ii.)	(iii.)	(iv.)		
—	—	—	—	—	—	—	—	—	—	—	—	28	28

(i.) Tonsils only; (ii.) Adenoids only; (iii.) Tonsils and Adenoids; (iv.) Other defects of the Nose and Throat.

Group 4.—Orthopædic and Postural Defects.

	Under Authority's Scheme. (1)			Otherwise. (2)			Total number treated
	Residential treatment with education. (i.)	Residential treatment without education. (ii.)	Non-Residential treatment at an Orthopædic Clinic. (iii.)	Residential treatment with education. (i.)	Residential treatment without education. (ii.)	Non-Residential treatment at an Orthopædic Clinic. (iii.)	
No. of children treated...	—	1	108†	—	—	—	108*

*In addition there were 44 cases having exercises in school apart from the Council's Orthopædic Scheme.
†Includes 19 cases under observation at the Clinic.

Group 5.—Dental Defects.

(1) Number of children who were:—

(*a*) Inspected by the Dentists:—

Routine Age Groups	Nil
Specials	272
Grand Total ...	272

(*b*) Found to require treatment 197

(*c*) Actually treated 197

(2) Half-days devoted to { Inspection. Nil. / Treatment. None especially. Secondary Scholars are treated with Elementary Scholars.

(3) Attendances made by children for treatment ... 1753

(4) Fillings ...	Permanent Teeth	1687	Total	1687
	Temporary Teeth	Nil		
(5) Extractions ...	Permanent Teeth	224	Total	270
	Temporary Teeth	46		

(6) Administration of general anæsthetics for extractions 95

(7) Other Operations	Permanent Teeth	564	Total	564
	Temporary Teeth	Nil		

Group 6.—Uncleanliness and Verminous Conditions.

(1) Total number of visits to School (girls) made during the year by the School Nurses 6

(2) Total number of examinations of children made in the School by School Nurses 1797

(3) Number of individual children found unclean ... 1

(4) Number of children cleansed under arrangements made by the Local Education Authority Nil

(5) Number of cases in which legal proceedings were taken :—

(*a*) Under the Education Act, 1921 Nil

(*b*) Under School Attendance Byelaws ... Nil

Group 7.—Treatment of all other Defects.

Defect or Disease. (1)	Number of Defects treated or under treatment during the year.		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Malnutrition	113	35	148
Defective Hearing	—	3	3
Enlarged Cervical Glands (Non-Tuberculous) ...	2	—	2
Defective Speech	3	—	3
Heart and Circulation ...	12	23	35
Bronchitis	3	4	7
Other Non-Tuberculous Diseases of Lungs	1	5	6
Pulmonary Tuberculosis—			
Definite	—	—	—
Suspected	—	—	—
Non-Pulmonary Tuberculosis	3	5	8
Nervous System	5	10	15
Other Defects and Diseases ...	56	68	124
Total ...	198	153	351

Summary of Treatment of Defects as Shown in Table 4.
(Groups 1, 2, 3, 4, 5, and 7.)

Defect or Disease. (1)	Number of Defects treated or under treatment during the year		
	Under the Authority's Scheme. (2)	Otherwise. (3)	Total. (4)
Minor Ailments	121	24	145
Visual Defects	178	1	179
Defects of Nose and Throat ...	15	13	28
Deformities	159	23	182
Dental Defects	197	5	202
Other Defects	198	153	351
Total ...	868	219	1087